

SECTION III.

Housing and Community Development Needs

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Introduction

This section satisfies the requirements of Sections 91.305, 91.310, and 91.315 of the State Government's Consolidated Plan Regulations. This section discusses the State's housing and community development conditions and needs, as identified by citizens through surveys, public forums, and public comments. A more comprehensive market analysis for the State and a discussion of the challenges of housing special needs groups are found in the Housing Market Analysis and Special Needs sections of the report.

Background on primary data sources. The qualitative housing and community development priorities were obtained from regional forums and a key person survey.

During early March 2003, 141 citizens and representatives from nonprofits and local governments attended regional forums to discuss and prioritize the housing and community development needs in their communities. The attendees completed a number of exercises where they discussed community needs, learned of available resources to meet their needs and identified remaining gaps.

In February 2003, 4,300 community surveys were distributed to local government leaders, providers of housing, health, and other community services, members of housing and community coalitions, and other interested parties. A total of 477 surveys were received, representing 90 of the State's 92 counties. Roughly 26 percent of the survey respondents represented local governments in the State, 12 percent were housing providers, 10 percent were social service providers, 10 percent were economic development professionals and the remaining respondents represented other types of organizations (e.g., advocacy, health care providers, etc.).

Regional Forums

To gather public input into the Consolidated Planning process, six public forums were held throughout the State in February 2003. The forums were regionally distributed, with two in the northern, two in the southern, and two in the central part of the State. The six forums were held in Valparaiso, Warsaw, Connersville, Jasper, Sellersburg and Greencastle and lasted approximately two hours. All sites where the forums were held were accessible to persons with disabilities.

The primary purpose of the forums was to provide Indiana residents the opportunity to voice their opinions about the greatest needs in their communities. A secondary purpose was to distribute information about the four HUD grants and eligible activities to citizens and representatives of housing and community development organizations. More than 4,000 English and approximately 350 Spanish brochures were distributed to citizens and organizations throughout the State to announce the forums.

Forum participants. The Statewide forums were very successful this year given the unusual weather. Together, 141 participants braved the cold and measurably significant snow to attend the sessions. As indicated in Exhibit III-1, the Jasper forum had the fewest number of participants. Only seven citizens attended the session; however, on the day the forum was held Jasper schools were closed and many small towns nearby were under travel alert. The summary of participants by site and type is provided in Exhibit III-1.

**Exhibit III-1.
Forum Participants**

<i>Forum Participants</i>	<i>Participants</i>	<i>Agency Representatives</i>	<i>Students</i>	<i>Advocates/ Residents</i>	<i>Homeless/ Transitional Housing Residents</i>
Valparaiso	20	20	0	0	0
Warsaw	19	18	0	1	0
Connersville	35	14	20	0	0
Jasper	7	7	0	0	0
Sellersburg	45	15	0	0	20
Greencastle	15	14	0	1	0
Total	141	88	20	12	20

Source: The Keys Group, 2003.

Each year the forum process is revised in an attempt to increase the participation and diversity of attendees. Although there was not an increase in attendance from the 2002 total of 187, of more significance was the diversity and number of organizations represented in this year's forums. Of the 141 participants, 88 represented local governments and State agencies, 20 were urban planning students from a local university, 12 were advocates/local residents and 20 were persons who were homeless and/or at-risk of homelessness. Within these categories were mayors, county and city commissioners, planning commission members, economic development officials, public housing representatives and a number of representatives from Indiana's special needs populations.

Forum process. The forums began with a brief welcome and introductions of the attending agency representatives. Following introductions, an overview of the forum agenda was presented and participants were divided into groups. The groups were generally organized to comprise a diversity of members from different agencies, city representatives, and concerned citizens from a cross section of locations. However, in order to provide a more comfortable setting to complete the exercises, groups representing the homeless, transitional housing residents, and university students were formed in Sellersburg and Connersville.

The groups were then assigned to complete two exercises. The first activity was designed to assemble a list of the top ten community issues. The groups worked together to come to consensus about the top issues facing their communities. Following this exercise, a representative from each group introduced the members and presented the group findings. After this exercise, representatives from

the three State agencies that administer the four HUD grants (the Department of Commerce, the Indiana Housing Finance Authority and the Family and Social Services Administration) made brief presentations about their agency programs, eligible housing and community development activities and contact information. The Indiana Civil Rights Commission (ICRC) made a presentation about fair housing issues.

The agency presentations were followed by a second group exercise. Participants were asked to consider the State program activities eligible for HUD funding and rank them in order of need for their communities. Groups were given a worksheet delineating CDBG/community development, CDBG/housing, HOME, HOPWA, and ESG fundable activities and asked to prioritize each grouping.

Forum findings. The responses received from forum participants were developed into a list of community issues that were tabulated according to the following factors: 1) The number of forums in which they were listed as a top issue and 2) The number of times they were listed as an issue by the forum groups. Exhibit III-2 on the following page shows the community issues listed as top concerns in ***at least one forum***. The x's represent the locations where the issues were listed as a "top ten" need in the community; the "total" column shows the number of locations in which the issue was listed. Exhibit III-3 lists issues that were listed at only one forum, but were the top ten issues in that particular area.

Exhibit III-2.
Top Community Issues

<i>Issues</i>	<i>Valparaiso</i>	<i>Warsaw</i>	<i>Connersville</i>	<i>Jasper</i>	<i>Sellersburg</i>	<i>Greencastle</i>	<i>Total</i>
Housing (affordable) for very low-income	x	x	x	x	x	x	6
Homeless shelter/transitional housing & facilities	x	x	x	x	x	x	6
Transportation	x	x	x	x	x	x	6
Youth aging out of foster care	x	x	x	x	x	x	6
Healthcare/dental services (affordable) for uninsured	x	x	x		x	x	5
Infrastructure (roads/sewer/water)		x	x	x	x	x	5
Downtown revitalization		x		x	x	x	4
Job training/workforce development (paid)		x		x	x	x	4
Drug education	x	x			x		3
Education opportunities/cost (vocational)			x	x		x	3
Elderly in home housing services	x			x		x	3
Jobs (better/paying living wage)	x		x		x		3
Rent /security deposit payment for in need	x	x			x		3
Shelter funding		x			x	x	3
Daycare (affordable) adult and child		x			x		2
Economic development			x	x			2
Education independent living skills	x				x		2
Education quality	x		x				2
Homeownership counseling for credit issues		x			x		2
Mental health (affordable)	x				x		2
Modification accessibility issues	x					x	2
Operation dollars for providers		x			x		2
Resource information/coordinator	x				x		2
Shelters for mentally ill	x	x					2
Unemployment	x		x				2
Utility payment/cost assistance	x				x		2
Work/housing accessibility	x				x		2
Workforce development	x				x		2

Source: The Keys Group, 2003.

Exhibit III-3.
Top Ten Issues Listed at Only One Forum

<i>Top Issues</i>
Accessibility (ADA) funds
The brain drain where Indiana's educated leave the State for better job opportunities
Brownfields
Clothing assistance for homeless
Emergency/crisis center funding
Lack of diversity in towns
Domestic violence
School attendance enforcement
Energy cost
Environmental integrity
Family values
Shortage of foster families
Health benefits for retirees
Outreach and integration of Hispanics/minorities
Housing for the disabled and single men
No land or infrastructure for new housing
Housing rehabilitation
Shortage of rural sanitary and safe affordable housing
Housing stock condition of both single family and rental structures
Literacy training
Counseling for personal finance issues
Planning and policy Statewide
Property tax loss
Safe environments
Collaboration and coordination of services
Single parent assistance, special needs housing
Grant matching funds and mentoring for those who would like to better themselves

Source: The Keys Group, 2003.

Top housing and community issues. Most of the issues presented by the forum groups this year were similar to those issues presented in prior years (e.g., affordable housing, improvements to public infrastructure, etc.). However, new this year was the number of times and forums the issue relating to housing and services for emancipated youth (i.e., youth aging out of foster care) was raised as a top concern. Some of the participants at the six forums were very vocal about this issue and maintained that it may be the number one issue facing the State. Other issues that topped the list of concerns included the need for homeless shelters, transitional housing, housing for the very low-income, and improvements to transportation. All of the aforementioned issues were raised at all six forums as

major concerns by the participants. In addition, of primary concern at more than three forums were healthcare for the uninsured, public infrastructure improvements, (roads, water, and sewer), downtown revitalization, job training and paid workforce development.

Program priorities. The second forum exercise provided the opportunity for participants to prioritize program activities in all of the five funded program areas. The program activity ranking in Exhibit III-4 lists the activities in order of priority. The priority rankings were developed by summing the rankings and dividing by the number of forum groups participating.

Exhibit III-4.
Program Activity 2003 Priority Ranking

	<i>CDBG/CD</i>	<i>CDBG/Housing</i>	<i>HOME</i>	<i>HOPWA</i>	<i>ESG</i>
<i>Most Needed</i>	Water	Emergency shelter	Transitional housing	Support services	Shelter operations/salaries
	Infrastructure housing	Youth shelter	Rental housing	Rental assistance	Shelter operations/utility
	Health care	Down payment assistance	Homeownership	Short term rent	Casework
	Sewer	Renter rehabilitation	Counseling/down payment assistance	Rehabilitation	Shelter operations/other needs
	Daycare	Transitional housing rehabilitation	Owner occupied housing	Operation cost	1st month rent/client
	Storm	Housing needs assessments	Tenant rental assistance	Technical assistance	Security deposit/client
	Fire	Owner rehabilitation	Homebuyer refinance	Administration	Back utility bills/client
	Downtown revitalization	Feasibility study	Redevelopment loan	Housing information	Utility bills client
	Community center	Migrant/seasonal worker housing	Rental refinance	Acquisition	Rental payment/client
	Senior citizen center		Lease purchase	Housing repair	
<i>Least Needed</i>	Library			New construction	

Source: The Keys Group, 2003.

Although there were a few activities that ranked consistently in the top 5, there was not a consistent pattern of activity priority ranking throughout this forum exercise. The lack of strong consistency among forums emphasizes the diversity of needs in Indiana's nonentitlement communities and the importance of providing flexible programs and activities to meet the needs.

The following exhibits and text detail the results of the forum exercise where participants ranked the community needs by HUD programs and activities. The findings are provided for both the overall rankings and the rankings of the individual forums. The activities were ranked on a scale of 1 to 10, with 1 being the most needed and 10 being the least needed.

Top program activities: CDBG/community development. As Exhibit III-5 illustrates, water and infrastructure for affordable housing were, on average, the top CDBG/community development program activities. It should be noted that the top four ranked activities (water, infrastructure, healthcare and sewer) all had very close rankings – that is, an average ranking score between 3.7 and 3.9.

Exhibit III-6 through III-11 show how the CDBG/community development activities were ranked at the individual forums. The top community development needs were fairly consistent among the individual forums: public infrastructure improvements, affordable housing infrastructure, day care and health care. Library expansion consistently ranked the lowest.

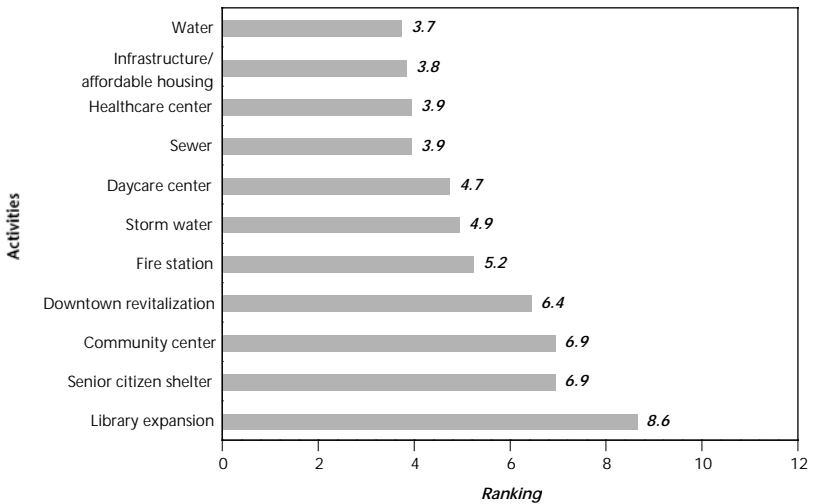
**Exhibit III-5.
CDBG/Community
Development Activities,
Rankings, All Forums**

Note:

Activities were ranked on a scale of 1 to 10, with 1 being the most needed and 10 being the least needed.

Source:

The Indiana Consolidated Plan Update 2003, Public Forums.



**Exhibit III-6.
Valparaiso
CDBG/Community
Development Activities**

Note:

Activities were ranked on a scale of 1 to 10, with 1 being the most needed and 10 being the least needed.

Source:

The Indiana Consolidated Plan Update 2003, Public Forums.

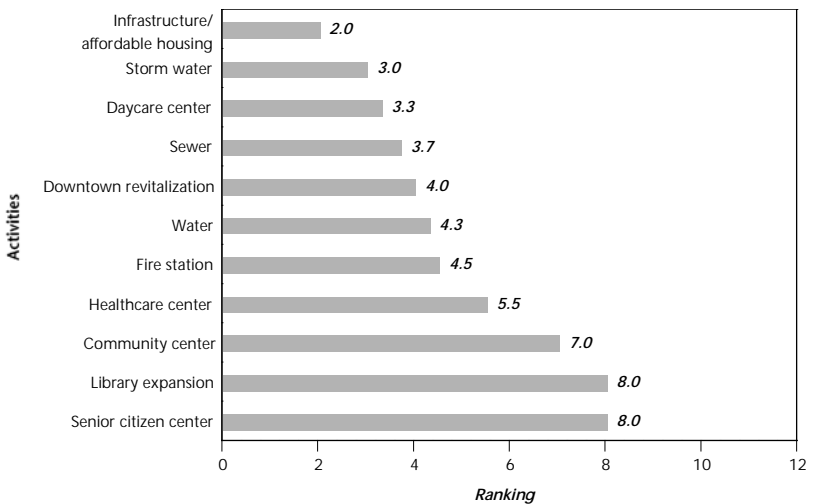


Exhibit III-7. Warsaw CDBG/Community Development Activities

Note:

Activities were ranked on a scale of 1 to 10, with 1 being the most needed and 10 being the least needed.

Source:

The Indiana Consolidated Plan Update 2003, Public Forums.

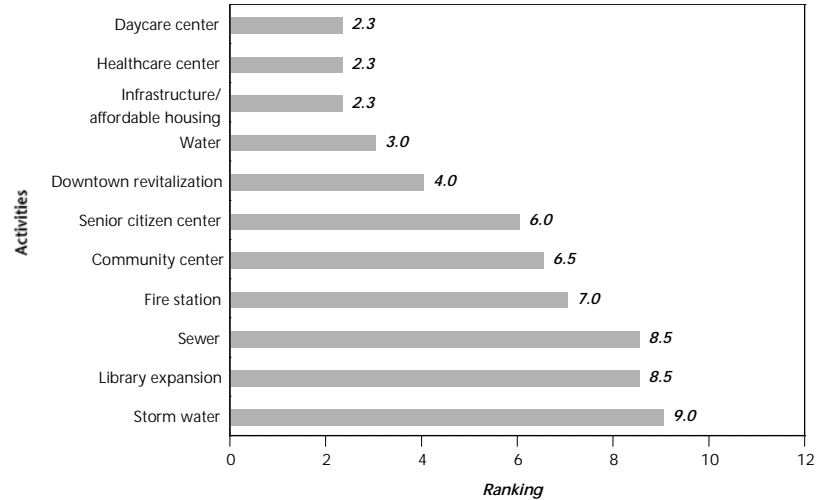


Exhibit III-8. Connersville CDBG/Community Development Activities

Note:

Activities were ranked on a scale of 1 to 10, with 1 being the most needed and 10 being the least needed.

Source:

The Indiana Consolidated Plan Update 2003, Public Forums.

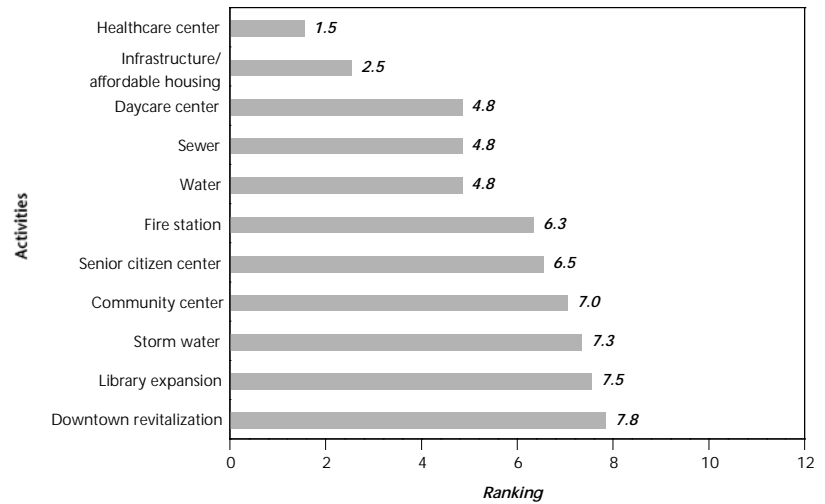


Exhibit III-9. Jasper CDBG/Community Development Activities

Note:

Activities were ranked on a scale of 1 to 10, with 1 being the most needed and 10 being the least needed.

Source:

The Indiana Consolidated Plan Update 2003, Public Forums.

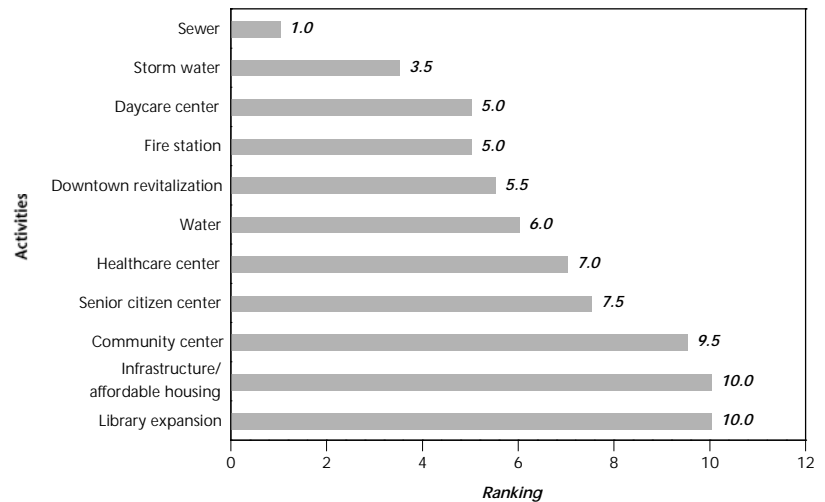


Exhibit III-10. Sellersburg CDBG/Community Development Activities

Note:

Activities were ranked on a scale of 1 to 10, with 1 being the most needed and 10 being the least needed.

Source:

The Indiana Consolidated Plan Update 2003, Public Forums.

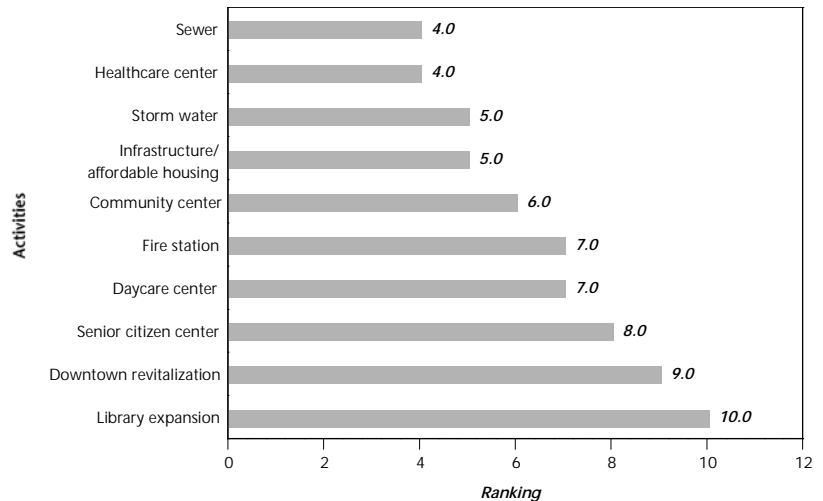


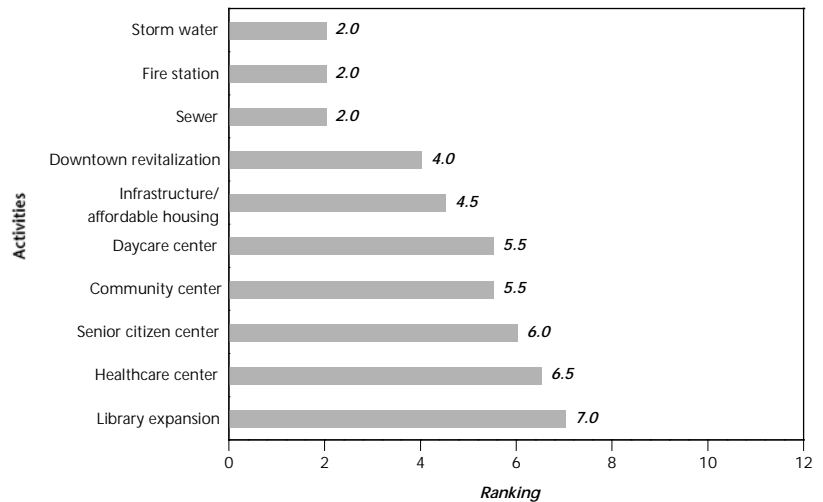
Exhibit III-11. Greencastle CDBG/Community Development Activities

Note:

Activities were ranked on a scale of 1 to 10, with 1 being the most needed and 10 being the least needed.

Source:

The Indiana Consolidated Plan Update 2003, Public Forums.



Top issues: CDBG/housing. Exhibit III-12 on the following page demonstrates the top overall CDBG ***housing*** activities, including emergency and youth shelters; which had average rankings within a few percentage points of each other (3.3 and 3.7). These two activities, along with rental housing rehabilitation for owners, were consistently included in the top five activities. Within the individual forums, rental housing owner rehabilitation received the highest average ranking of 1.5 in Greenfield and housing for migrant workers received the lowest of 9.3 in Warsaw. Exhibits III-13 through III-18 display the top CDBG housing activities as identified by each community.

Exhibit III-12. CDBG/Housing Activities, Rankings, All Forums

Note:

Activities were ranked on a scale of 1 to 10, with 1 being the most needed and 10 being the least needed.

Source:

The Indiana Consolidated Plan Update 2003, Public Forums.

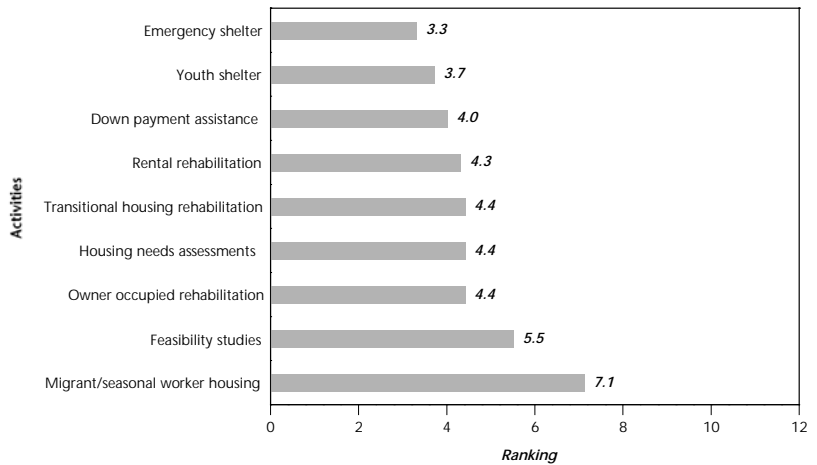


Exhibit III-13. Valparaiso CDBG/Housing Activities

Note:

Activities were ranked on a scale of 1 to 10, with 1 being the most needed and 10 being the least needed.

Source:

The Indiana Consolidated Plan Update 2003, Public Forums.

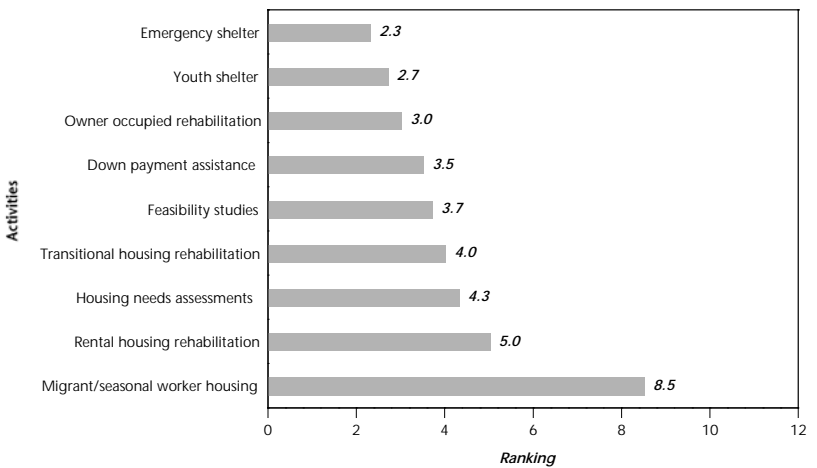


Exhibit III-14. Warsaw CDBG/Housing Activities

Note:

Activities were ranked on a scale of 1 to 10, with 1 being the most needed and 10 being the least needed.

Source:

The Indiana Consolidated Plan Update 2003, Public Forums.

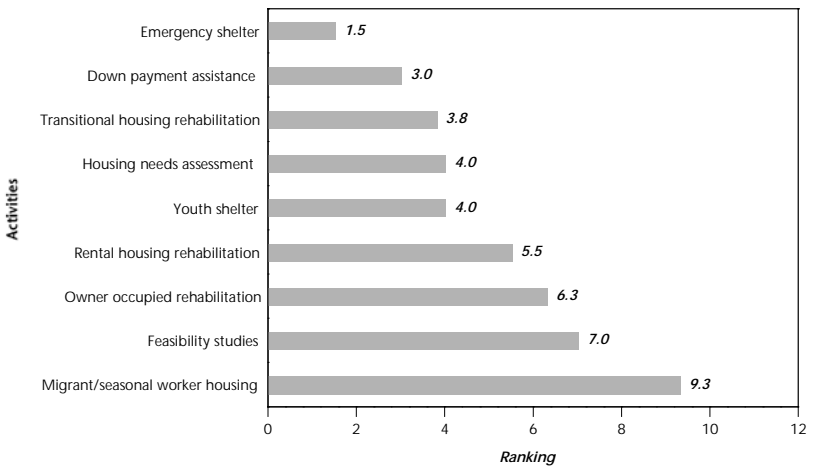


Exhibit III-15. Connersville CDBG/Housing Activities

Note:

Activities were ranked on a scale of 1 to 10, with 1 being the most needed and 10 being the least needed.

Source:

The Indiana Consolidated Plan Update 2003, Public Forums.

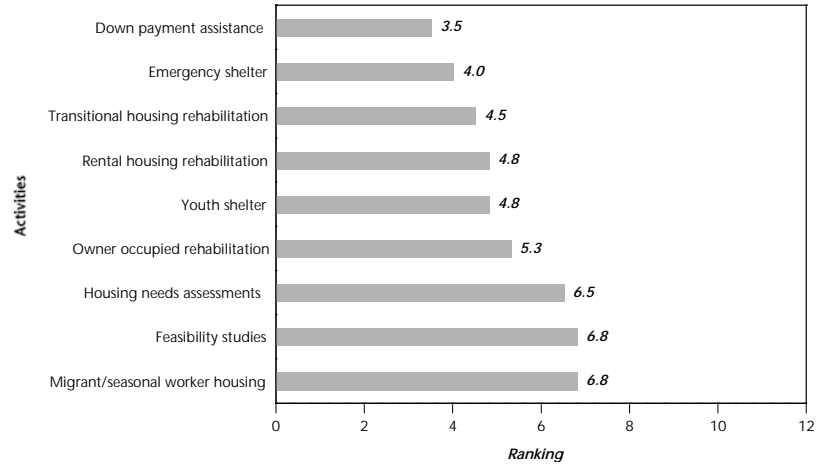


Exhibit III-16. Jasper CDBG/Housing Activities

Note:

Activities were ranked on a scale of 1 to 10, with 1 being the most needed and 10 being the least needed.

Source:

The Indiana Consolidated Plan Update 2003, Public Forums.

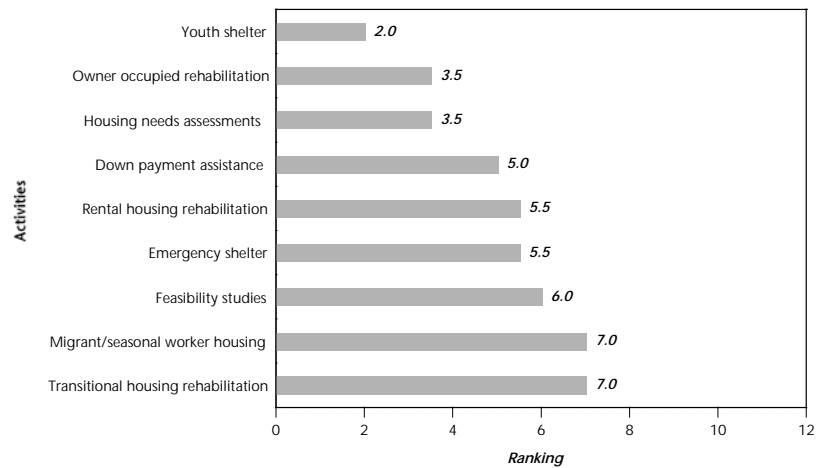


Exhibit III-17. Sellersburg CDBG/Housing Activities

Note:

Activities were ranked on a scale of 1 to 10, with 1 being the most needed and 10 being the least needed.

Source:

The Indiana Consolidated Plan Update 2003, Public Forums.

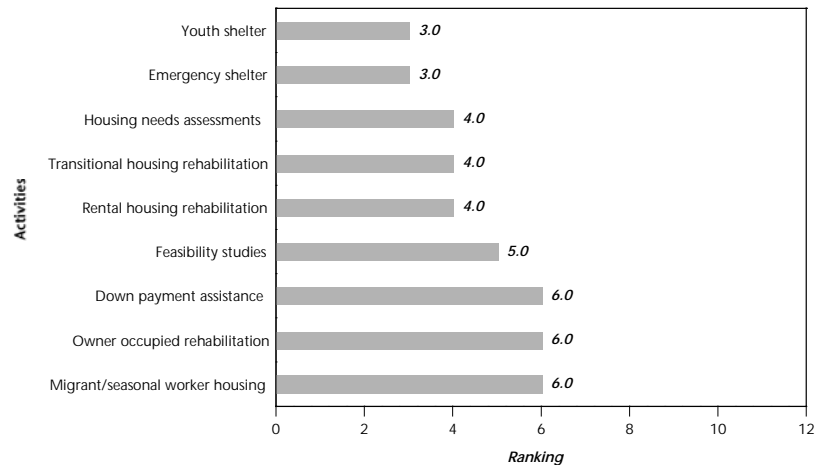


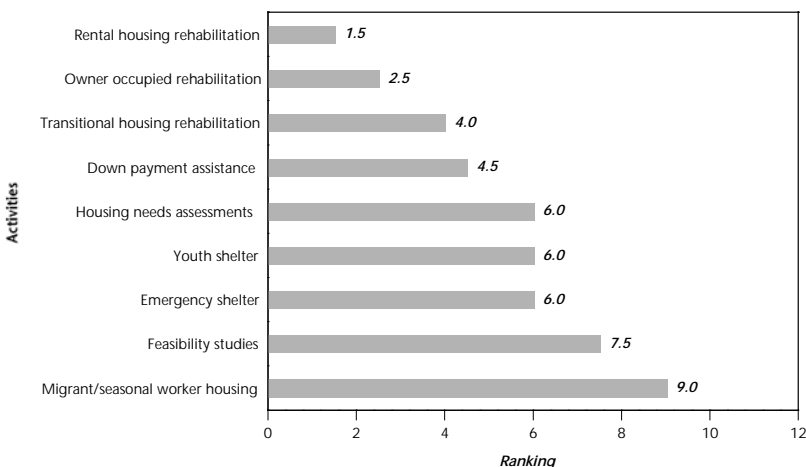
Exhibit III-18. Greencastle CDBG/Housing Activities

Note:

Activities were ranked on a scale of 1 to 10, with 1 being the most needed and 10 being the least needed.

Source:

The Indiana Consolidated Plan Update 2003, Public Forums.



Top issues: HOME. The activities associated with providing and developing housing opportunities for those in need of transitional or rental housing units ranked on average the highest overall for HOME funded eligible activities. Providing assistance to those wanting to become homeowners also received high overall rankings. In the individual forum rankings, transitional housing was consistently ranked as the top need by all groups. The lowest priorities were given to the activities of rental refinance and lease purchase; which received rankings of 10 and 9 in three out of the six forums. These findings are shown in Exhibits III-19 through III-25.

Exhibit III-19. HOME Activities, Rankings, All Forums

Note:

Activities were ranked on a scale of 1 to 10, with 1 being the most needed and 10 being the least needed.

Source:

The Indiana Consolidated Plan Update 2003, Public Forums.

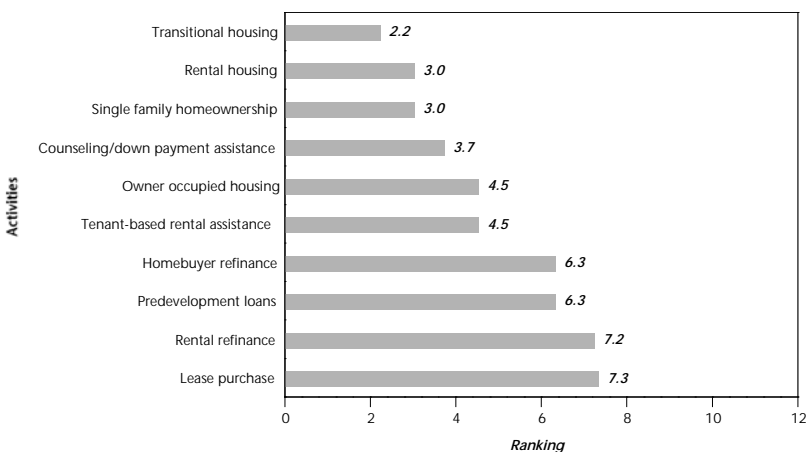


Exhibit III-20. Valparaiso HOME Activities

Note:

Activities were ranked on a scale of 1 to 10, with 1 being the most needed and 10 being the least needed.

Source:

The Indiana Consolidated Plan Update 2003, Public Forums.

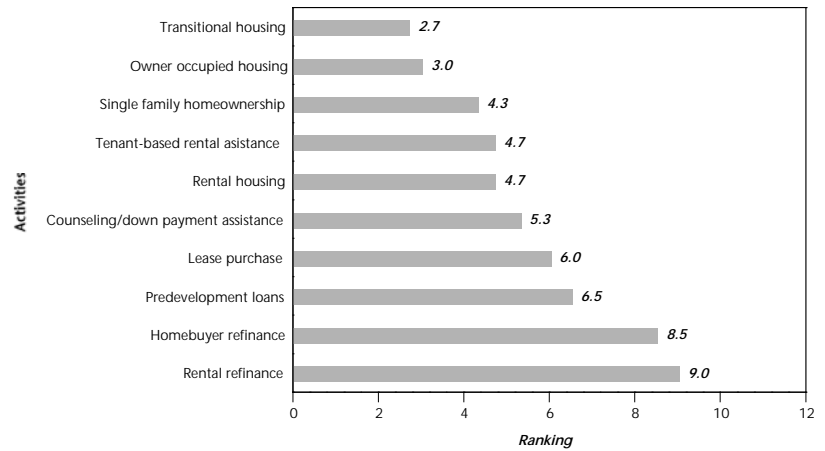


Exhibit III-21. Warsaw HOME Activities

Note:

Activities were ranked on a scale of 1 to 10, with 1 being the most needed and 10 being the least needed.

Source:

The Indiana Consolidated Plan Update 2003, Public Forums.



Exhibit III-22. Connersville HOME Activities

Note:

Activities were ranked on a scale of 1 to 10, with 1 being the most needed and 10 being the least needed.

Source:

The Indiana Consolidated Plan Update 2003, Public Forums.

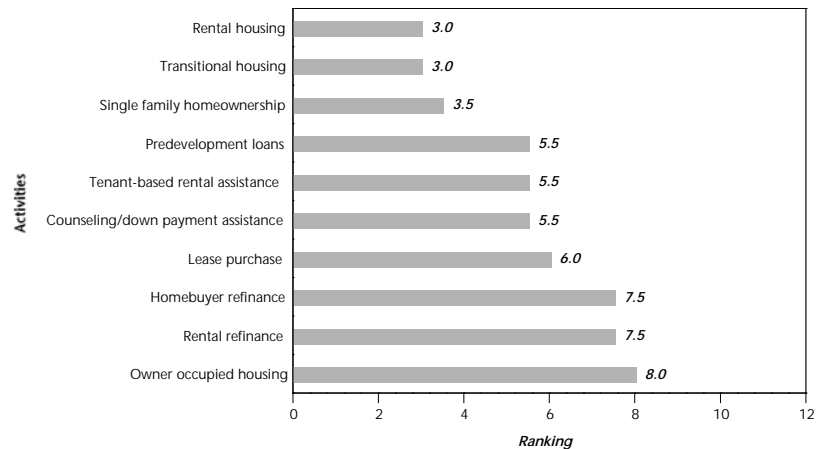


Exhibit III-23. Jasper HOME Activities

Note:

Activities were ranked on a scale of 1 to 10, with 1 being the most needed and 10 being the least needed.

Source:

The Indiana Consolidated Plan Update 2003, Public Forums.

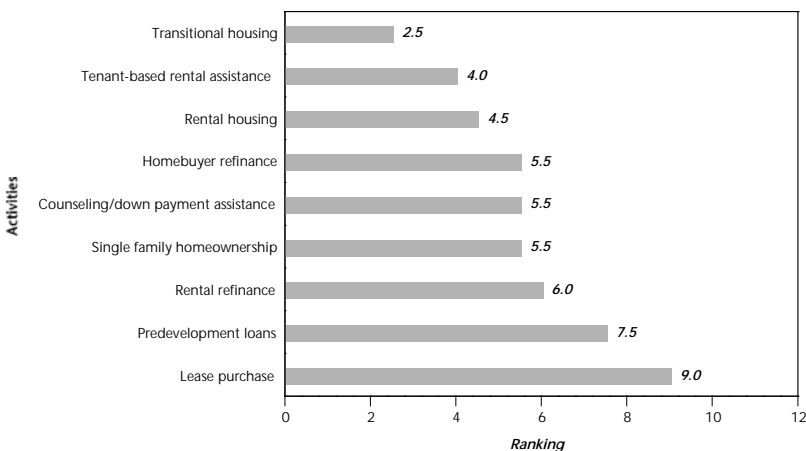


Exhibit III-24. Sellersburg HOME Activities

Note:

Activities were ranked on a scale of 1 to 10, with 1 being the most needed and 10 being the least needed.

Source:

The Indiana Consolidated Plan Update 2003, Public Forums.

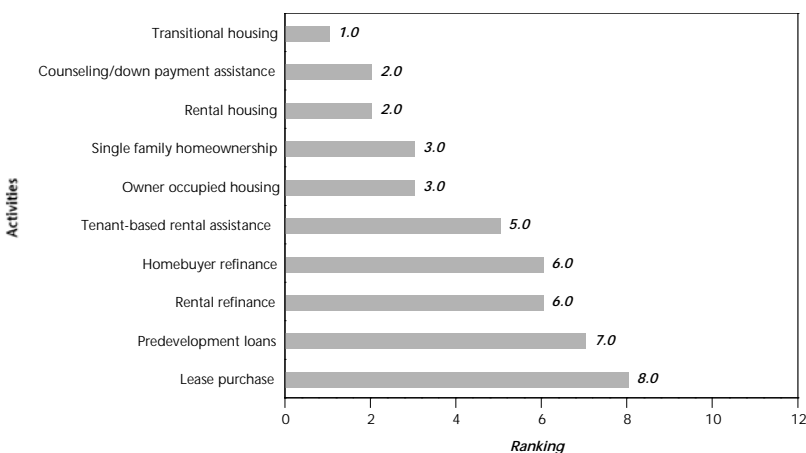


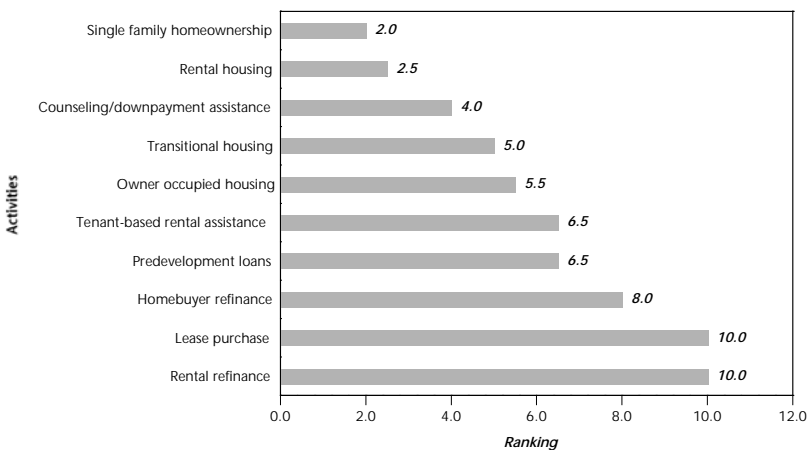
Exhibit III-25. Greencastle HOME Activities

Note:

Activities were ranked on a scale of 1 to 10, with 1 being the most needed and 10 being the least needed.

Source:

The Indiana Consolidated Plan Update 2003, Public Forums.



Top Issues: Housing for People with AIDS (HOPWA). As shown in Exhibits III-26 through III-32 on the following pages, support services and rental assistance for those with HIV/AIDS were clearly the top overall program activities under the HOPWA program. These activities were consistently at the top of the list in all forums.

Exhibit III-26. HOPWA Activities, Ranking, All Forums

Note:

Activities were ranked on a scale of 1 to 10, with 1 being the most needed and 10 being the least needed.

Source:

The Indiana Consolidated Plan Update 2003, Public Forums.

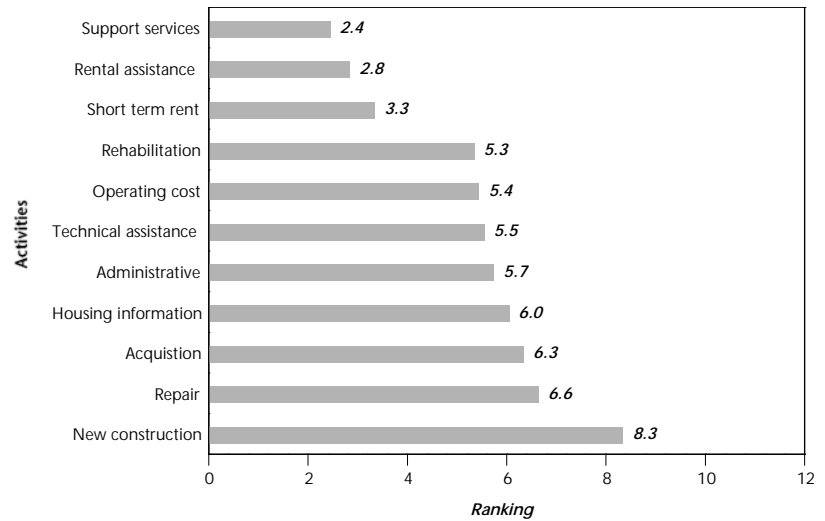


Exhibit III-27. Valparaiso HOPWA Activities

Note:

Activities were ranked on a scale of 1 to 10, with 1 being the most needed and 10 being the least needed.

Zero indicates that the activity was not ranked.

Source:

The Indiana Consolidated Plan Update 2003, Public Forums.

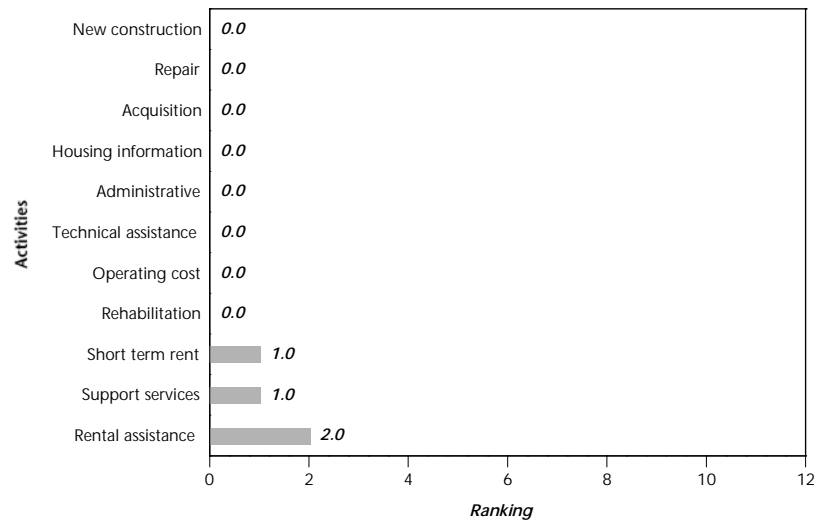


Exhibit III-28. Warsaw HOPWA Activities

Note:

Activities were ranked on a scale of 1 to 10, with 1 being the most needed and 10 being the least needed.

Source:

The Indiana Consolidated Plan Update 2003, Public Forums.

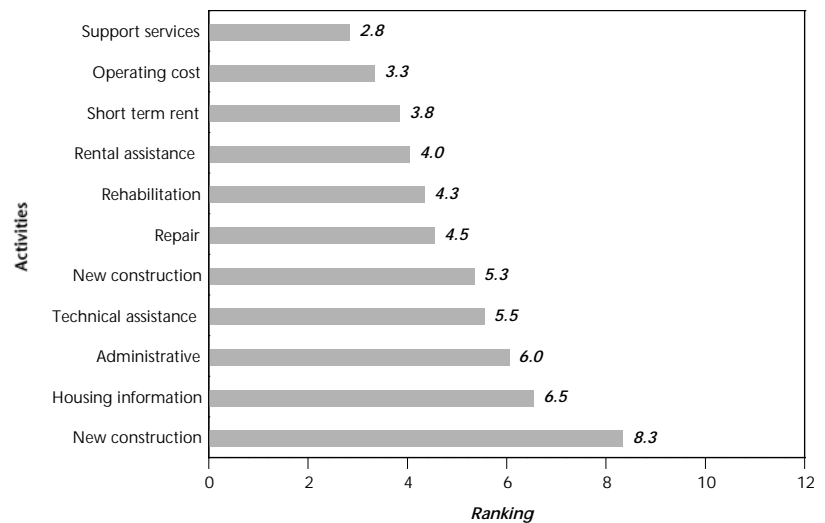


Exhibit III-29. Connersville HOPWA Activities

Note:

Activities were ranked on a scale of 1 to 10, with 1 being the most needed and 10 being the least needed.

Source:

The Indiana Consolidated Plan Update 2003, Public Forums.

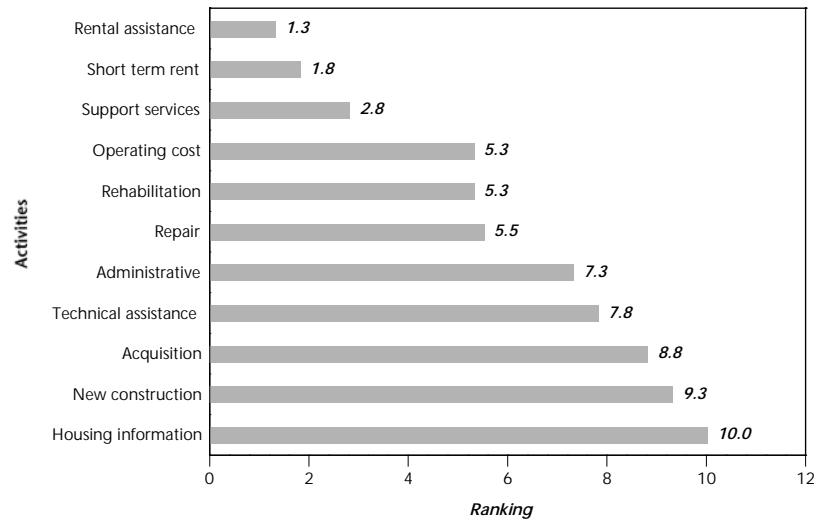


Exhibit III-30. Jasper HOPWA Activities

Note:

Activities were ranked on a scale of 1 to 10, with 1 being the most needed and 10 being the least needed.

Source:

The Indiana Consolidated Plan Update 2003, Public Forums.

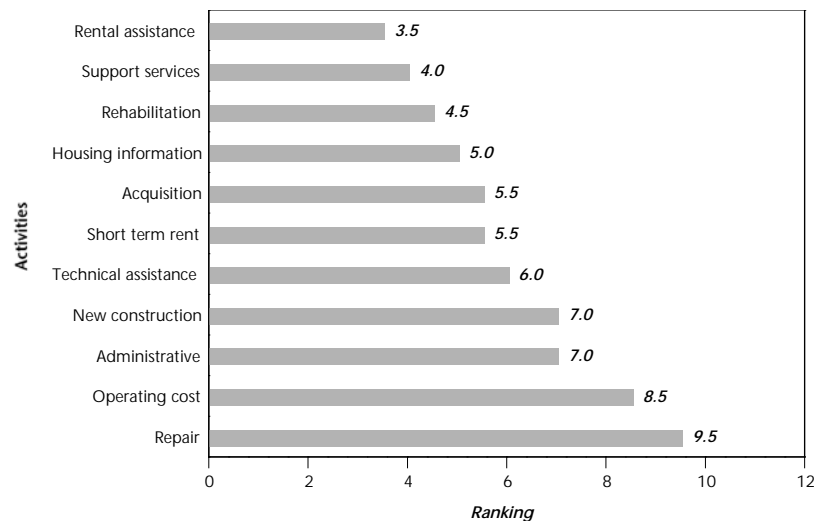


Exhibit III-31. Sellersburg HOPWA Activities

Note:

Activities were ranked on a scale of 1 to 10, with 1 being the most needed and 10 being the least needed.

Source:

The Indiana Consolidated Plan Update 2003, Public Forums.

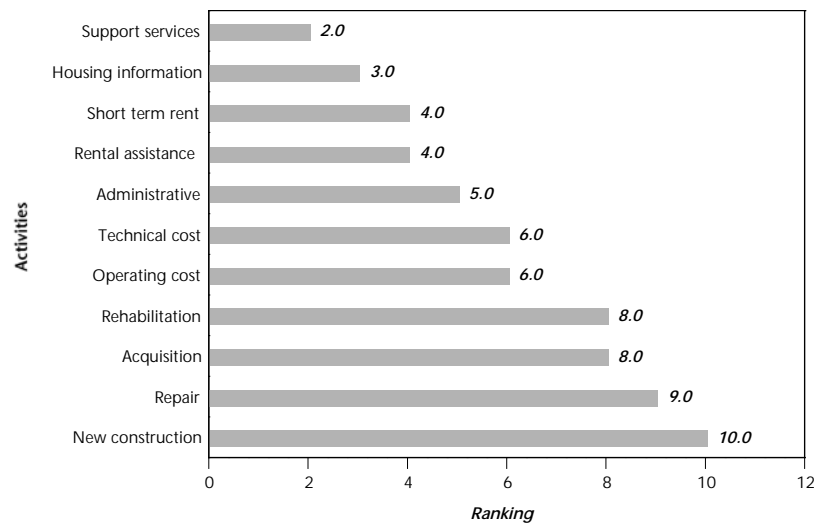


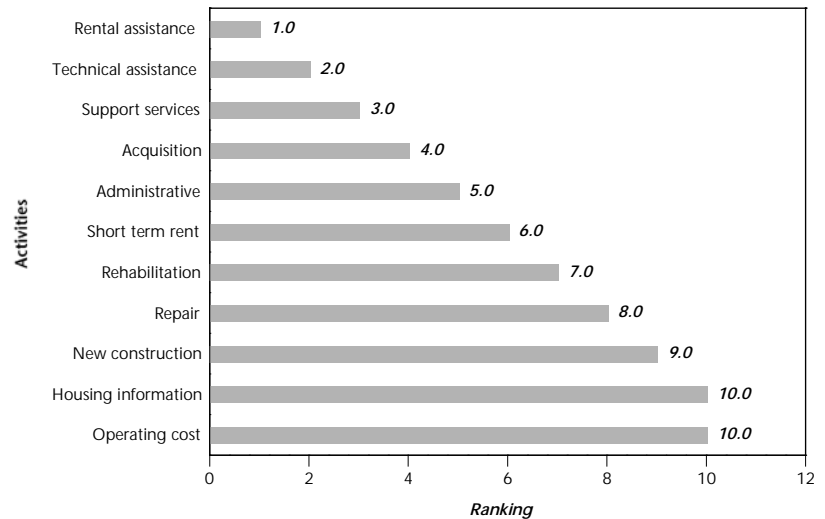
Exhibit III-32. Greencastle HOPWA Activities

Note:

Activities were ranked on a scale of 1 to 10, with 1 being the most needed and 10 being the least needed.

Source:

The Indiana Consolidated Plan Update 2003, Public Forums.



Top Issues: Emergency Shelter Grants (ESG). While the HOPWA program highest priority rankings were those associated with helping clients with housing and living expenses, the opposite was true for the ESG program activity rankings: Shelter management (specifically in terms of salaries) and operational expenses ranked as the top priorities for the ESG program. Supporting service providers with administrative overhead was the top ESG program activity priority across all forums; while providing money to cover client personal and housing expenses ranked well below shelter management support. This breakdown held true even when examining the forum-by-forum group priorities, as shown in the following exhibits.

Exhibit III-33. ESG Activities, Rankings, All Forums

Note:

Activities were ranked on a scale of 1 to 10, with 1 being the most needed and 10 being the least needed.

Source:

The Indiana Consolidated Plan Update 2003, Public Forums.

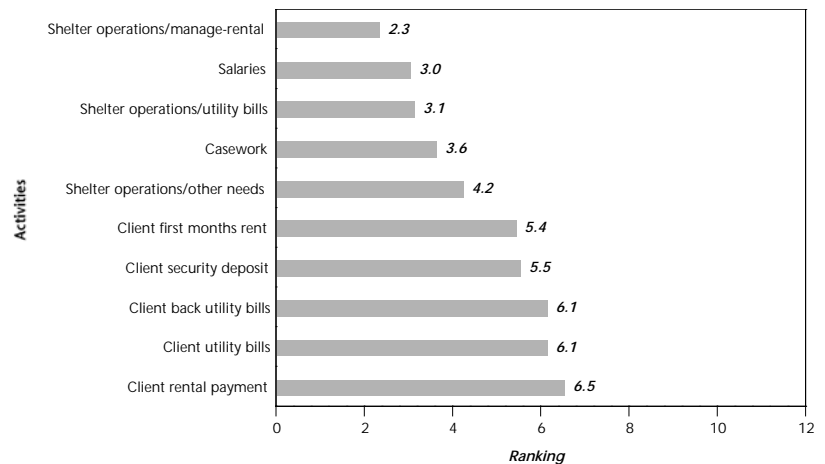


Exhibit III-34. Valparaiso ESG Activities

Note:

Activities were ranked on a scale of 1 to 10, with 1 being the most needed and 10 being the least needed.

Source:

The Indiana Consolidated Plan Update 2003, Public Forums.

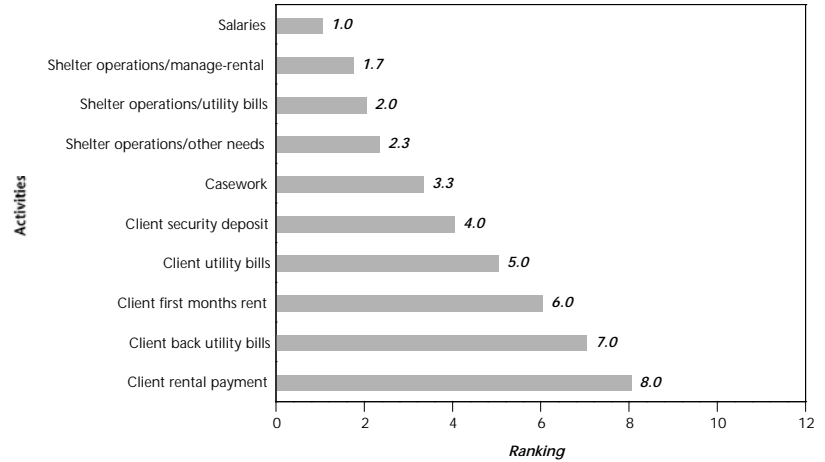


Exhibit III-35. Warsaw ESG Activities

Note:

Activities were ranked on a scale of 1 to 10, with 1 being the most needed and 10 being the least needed.

Source:

The Indiana Consolidated Plan Update 2003, Public Forums.

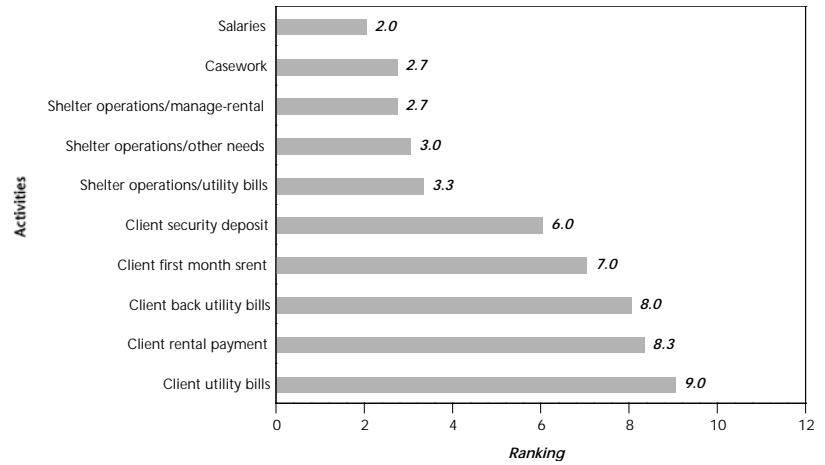


Exhibit III-36. Connersville ESG Activities

Note:

Activities were ranked on a scale of 1 to 10, with 1 being the most needed and 10 being the least needed.

Source:

The Indiana Consolidated Plan Update 2003, Public Forums.

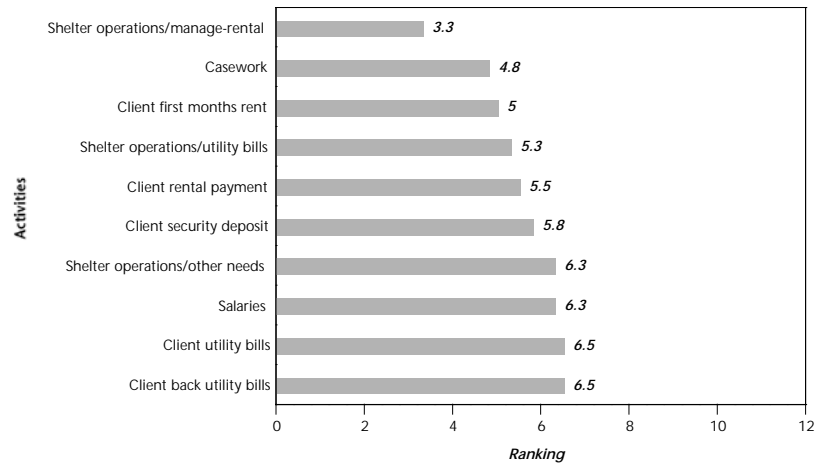


Exhibit III-37. Jasper ESG Activities

Note:

Activities were ranked on a scale of 1 to 10, with 1 being the most needed and 10 being the least needed.

Source:

The Indiana Consolidated Plan Update 2003, Public Forums.

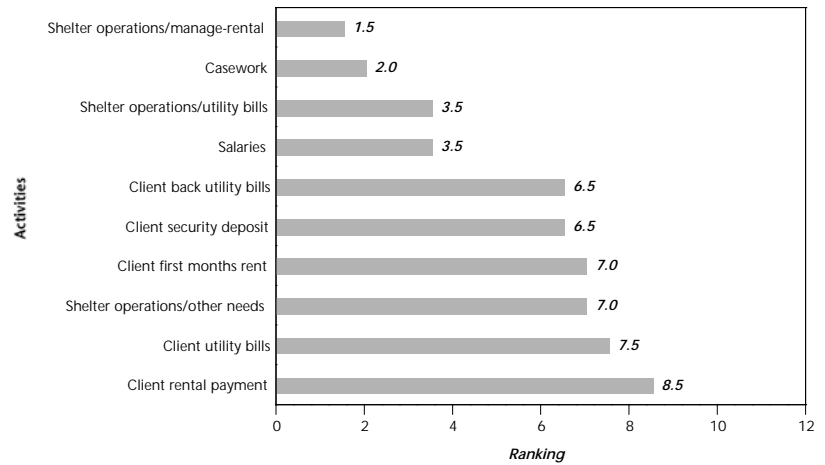


Exhibit III-38. Sellersburg ESG Activities

Note:

Activities were ranked on a scale of 1 to 10, with 1 being the most needed and 10 being the least needed.

Source:

The Indiana Consolidated Plan Update 2003, Public Forums.

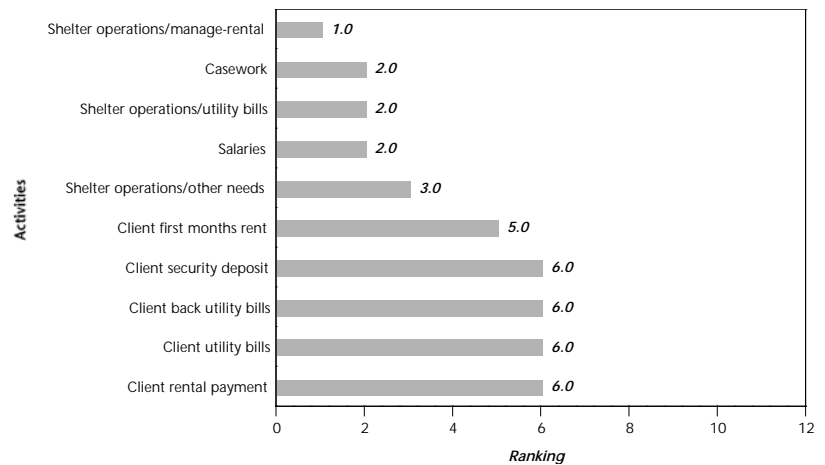


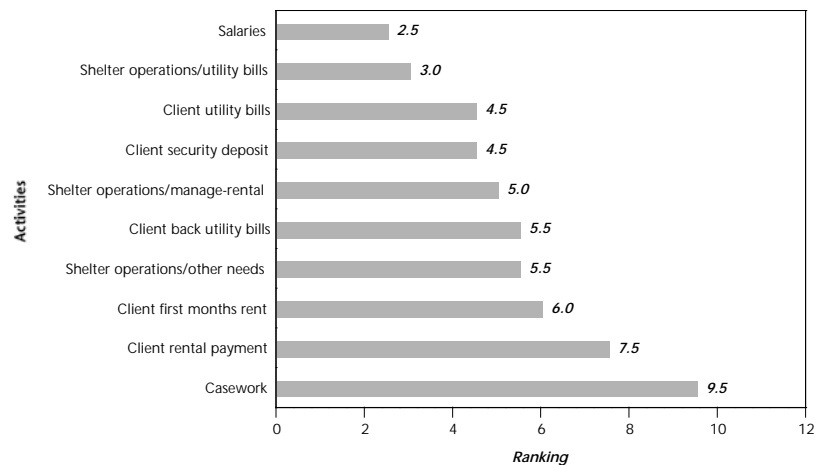
Exhibit III-39. Greencastle ESG Activities

Note:

Activities were ranked on a scale of 1 to 10, with 1 being the most needed and 10 being the least needed.

Source:

The Indiana Consolidated Plan Update 2003, Public Forums.



Top priorities: fair housing. The final section of the exercise provided a list of fair housing activities ongoing in the State of Indiana by the Indiana Civil Rights Commission (ICRC). Exhibit III-39 lists the fair housing activities as prioritized by participants. As the exhibit demonstrates, each community's priorities and needs were very different.

Exhibit III-39.
Fair Housing Priorities, All Forums

<i>Valparaiso</i>	<i>Warsaw</i>	<i>Connersville</i>	<i>Jasper</i>	<i>Sellersburg</i>	<i>Greenfield</i>
Hold symposia in Language other than English	Hold training predatory lending	Conduct fair housing test in area	Hold symposia in Language other than English	Hold training modification and accommodation	Hold training predatory lending
Hold housing symposia rights of minorities	Distribute fair housing brochures	Implement fair housing ordinance	Hold training predatory lending	Implement fair housing ordinance	Hold housing symposia rights of minorities
Recruit members for fair housing task force		Hold training predatory lending	Hold housing symposia rights of minorities	Target a fair housing concern	Hold training modification and accommodation
Hold training predatory lending		Hold training modification and accommodation	Hold training modification and accommodation	Recruit members for fair housing task force	Recruit members for fair housing task force
Hold training modification and accommodation		Recruit members for fair housing task force	Implement fair housing ordinance	Hold training predatory lending	Hold symposia in Language other than English
Implement fair housing ordinance		Target a fair housing concern	Distribute fair housing brochures	Conduct fair housing test in area	Hold statewide summit
Conduct fair housing test in area		Distribute fair housing brochures	Conduct fair housing test in area	Distribute fair housing brochures	Distribute fair housing brochures
Distribute fair housing brochures		Hold statewide summit	Recruit members for fair housing task force	Hold symposia in Language other than English	Target a fair housing concern
Target a fair housing concern		ICRC partner with local government	Hold Statewide summit	Hold housing symposia rights of minorities	Implement fair housing ordinance
ICRC partner with local government		Hold housing symposia rights of minorities	ICRC partner with local government	ICRC partner with local government	ICRC partner with local government
Hold statewide summit		Hold symposia in Language other than English	Target a fair housing concern	Hold statewide summit	Conduct fair housing test in area

Source: The Keys Group, 2003.

Community Survey

In January 2003, approximately 4,300 surveys were distributed to local government officials, community leaders, housing providers, economic development professionals, social service organizations and others. The surveys asked respondents a number of questions about housing and community development needs, including fair housing accessibility, in their communities. A copy of the survey is located in Appendix C. A total of 477 surveys were returned, for a response rate of 12 percent.¹

¹ This rate accounts for surveys that were returned due to bad addresses.

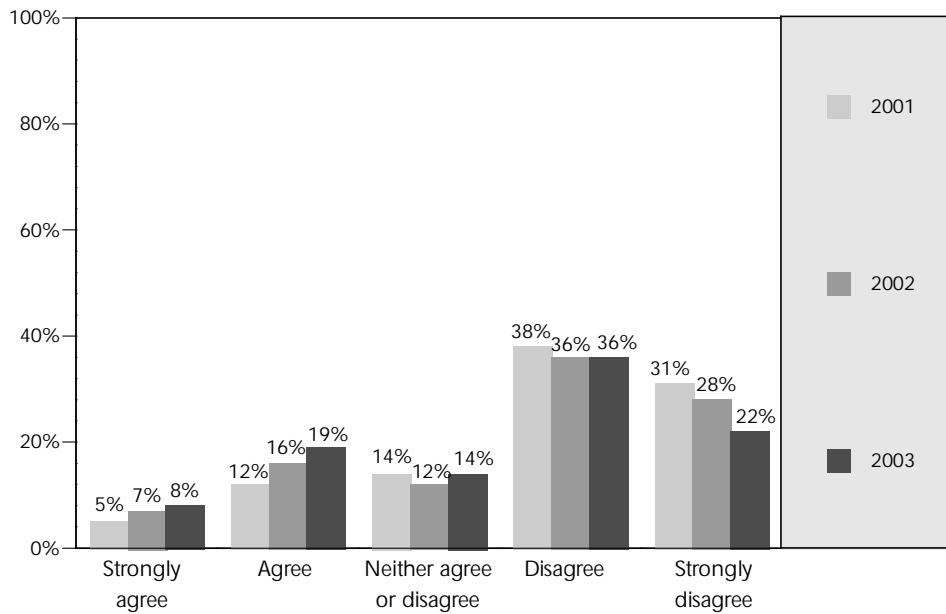
Demographics of survey respondents. Surveys were received from 90 of the 92 counties in Indiana. Exhibit III-40 shows the distribution of the various types of organizations from which surveys were received. As the Exhibit shows, a wide variety of types of organizations were represented in the 2003 survey data. The distribution of respondent organizations was very similar to 2002; both were more diverse than the 2001 respondent organizations (although several of these organizations were unidentifiable as they responded to the “other” category).

Exhibit III-40.
Distribution of
Respondents by Type of
Organization

Source:
Community Survey, Indiana Consolidated
Plan, 2003.

<i>Type of Organization</i>	<i>2003</i>	<i>2002</i>	<i>2001</i>
Advocacy/education	7%	7%	5%
Citizen	2%	2%	-
Day care (adult and child)	2%	2%	-
Economic or community development	10%	9%	8%
Employment/training provider	1%	2%	-
Financial institutional/lender	3%	0%	1%
Group home	2%	2%	-
Health care provider	3%	2%	-
Homeless shelter	3%	4%	-
Housing provider	12%	13%	12%
Legal assistance	0%	0%	0%
Local government	26%	29%	46%
Property manager	3%	2%	0%
Senior center	0%	2%	-
Senior housing provider	2%	3%	-
Social service provider	10%	10%	-
Other	<u>14%</u>	<u>12%</u>	<u>26%</u>
Total	100%	100%	100%

Housing inventory and quality. Respondents were asked a number of questions about the supply and condition of the housing in their communities. As shown in Exhibit III-41 on the following page, 58 percent of respondents felt that there was not enough housing in their communities to meet their needs. This was lower than in 2001 and 2002, when 69 and 64 percent of respondents said their communities did not have enough housing to meet demand. This trend may be indicative of a decrease in housing market demand due to weaker economic conditions or an improvement in overall housing supply.

Exhibit III-41.**There is Enough Housing in This Community to Meet Demand**

Source: Community Survey, Indiana Consolidated Plan, 2003.

Just over two-thirds of the survey respondents disagreed with the statement “There is enough **affordable** single family and rental housing in this community.” In 2002 there was a slightly higher disagreement rate of 71 percent. Only 18 percent of the 2003 respondents felt that there was adequate affordable housing.

Respondents were asked if the housing stock in their communities was in good condition. About half disagreed that the housing stock was in good condition, one-fourth agreed, and the final one-fourth neither agreed nor disagreed.

Respondents were also asked to rate the quality of their community’s single family and multifamily housing stock. Exhibit III-42 shows how respondents rated the condition of the housing stock in their communities in 2002 and 2003.

Exhibit III-42.**Quality of Single Family and Multifamily Housing**

Source:
Community Survey, Indiana Consolidated
Plan, 2003.

<i>Quality</i>	<i>Single Family</i>		<i>Multifamily</i>	
	<i>2003</i>	<i>2002</i>	<i>2003</i>	<i>2002</i>
Very Good	4%	5%	4%	3%
Good	24%	20%	18%	19%
Average	46%	48%	40%	37%
Poor	21%	21%	28%	31%
Very Poor	5%	6%	10%	10%
Total	100%	100%	100%	100%

The assessment of housing condition was relatively similar in 2002 and 2003: In both years, respondents ranked the quality of multifamily housing stock far below that of the single family housing stock in their communities. Thirty eight percent of respondents in 2003 and 41 percent of respondents in 2002 said the multifamily housing stock in their communities was in poor to very poor conditions (compared with 26 and 27 percent, respectively, of single family housing stock).

Exhibits III-43 and III-44 show responses to question pertaining to the need for new construction and rehabilitation of existing structures. Almost half of the respondents agreed that their community needed to add housing through new construction. A higher percentage — 66 percent — of respondents agreed with the need to focus on improving housing through rehabilitation.

Exhibit III-43.
"My Community Needs to Add Housing Through New Construction"

Source:
Community Survey, Indiana Consolidated Plan, 2003.

<i>New Construction</i>	<i>2003</i>	<i>2002</i>
Strongly agree	18%	19%
Agree	31%	33%
Neither agree or disagree	27%	27%
Disagree	17%	12%
Strongly disagree	<u>7%</u>	<u>9%</u>
Total	100%	100%

Exhibit III-44.
"My Community Needs to Focus on Improving Housing Through Rehabilitation of Existing Structures"

Source:
Community Survey, Indiana Consolidated Plan, 2003.

<i>Rehabilitation</i>	<i>2003</i>	<i>2002</i>
Strongly agree	27%	26%
Agree	39%	39%
Neither agree or disagree	21%	22%
Disagree	7%	9%
Strongly disagree	<u>6%</u>	<u>5%</u>
Total	100%	100%

When asked about homeowners' and renters' abilities to make minor repairs, most respondents felt that most homeowners could make needed repairs, but renters find it difficult to get landlords to make needed repairs. In both 2002 and 2003, approximately half of respondents ***disagreed*** with the statement "Renters in this community can get landlords to make needed repairs." The survey results suggest that the respondents' concerns about housing conditions are mostly related to rental properties.

Overall, the survey results indicate that the majority of communities do ***not*** have adequate housing to meet demand. The condition of housing stock, particularly rental units, remains a concern.

Housing affordability. The housing affordability section of the survey asked respondents to estimate the monthly rents and single family home prices in their communities. Exhibits III-45 and III-46 show the estimates of current monthly rent range and the average rental costs, by unit type.

Exhibit III-45.
Estimate of Current Monthly Rent

	<i>Studio/ Efficiency</i>	<i>1 Bedroom</i>	<i>2 Bedroom</i>	<i>3 Bedroom</i>	<i>4+ Bedroom</i>
Less than \$200	0%	1%	1%	1%	0%
\$200 to \$299	13%	4%	1%	0%	0%
\$300 to \$499	74%	69%	42%	15%	6%
\$500 to \$749	11%	25%	51%	67%	57%
\$750 to \$999	0%	1%	5%	15%	20%
\$1,000 or more	<u>0%</u>	<u>0%</u>	<u>0%</u>	<u>2%</u>	<u>17%</u>
Total	100%	100%	100%	100%	100%

Source: Community Survey, Indiana Consolidated Plan, 2003.

Exhibit III-46.
Average Monthly Rent Estimate

Source:
Community Survey, Indiana Consolidated Plan, 2003.

	<i>Average Monthly Rent Estimate</i>
Studio/Efficiency	\$368
1 Bedroom	\$425
2 Bedroom	\$507
3 Bedroom	\$605
4+ Bedroom	\$725

The average price of a single family “starter” home was estimated by respondents to be \$71,833.

Exhibit III-47 on the following page shows the average monthly rent estimate given by respondents for 2 bedroom apartment rents and “starter” home prices, by county.

Exhibit III-47.

Average Monthly Estimate for 2 Bedroom Rents, by County, January 2003

<i>County</i>	<i>Average Rent</i>	<i>County</i>	<i>Average Rent</i>
Adams	\$450	Johnson	\$533
Allen	\$541	Knox	\$449
Bartholomew	\$589	Kosciusko	\$462
Benton	\$417	LaGrange	\$550
Benton, Fountain and Warren	\$350	LaPorte	\$525
Benton, Fountain and Montgomery	\$500	Lake	\$583
Blackford	\$350	Lawrence	\$393
Boone	\$510	Madison	\$475
Brown	\$888	Marion	\$576
Carroll	\$438	Marshall	\$538
Cass	\$435	Monroe	\$665
Clark	\$313	Monroe and Owen	\$625
Clay	\$388	Montgomery	\$554
Clay, Parke, Putnam, Vigo and Vermillion	\$500	Morgan	\$275
Clinton	\$450	Noble	\$461
Crawford	\$475	Orange	\$300
Daviess	\$400	Perry	\$450
DeKalb	\$541	Pike	\$450
Dearborn	\$519	Porter	\$578
Delaware	\$550	Pulaski	\$350
Dubois	\$400	Putnam	\$500
Dubois, Pike, Orange, Crawford, Daviess and Martin	\$400	Randolph	\$300
Elkhart	\$567	Ripley	\$450
Elkhart and Goshen	\$590	Scott	\$550
Elkhart, Marshall and St. Joseph	\$850	Shelby	\$475
Fayette	\$368	Spencer	\$483
Floyd and Clark	\$700	St. Joseph	\$491
Franklin	\$350	Starke	\$600
Fulton	\$450	Steuben	\$500
Gibson	\$450	Switzerland	\$575
Grant	\$467	Tippecanoe	\$591
Greene	\$463	Union	\$450
Hamilton	\$450	Vanderburgh	\$475
Hancock	\$650	Vermillion	\$400
Harrison	\$538	Vigo	\$375
Hendricks	\$540	Wabash	\$360
Henry	\$467	Warrick	\$400
Howard	\$506	Washington	\$400
Huntington	\$400	Wayne	\$513
Huntington and Wells	\$475	Wells	\$390
Jackson	\$483	White	\$425
Jasper	\$475	Whitley	\$522
Jay	\$319		
Jefferson	\$500		
Jennings	\$400		

Source: Community Survey, Indiana Consolidated Plan, 2003.

Exhibit III-48.**Estimated Starter Single Family Home Prices, by County, January 2003**

<i>County</i>	<i>Average Home Price</i>	<i>County</i>	<i>Average Home Price</i>
Adams	\$67,500	Jennings	\$60,000
Allen	\$66,071	Johnson	\$87,500
Bartholomew	\$87,750	Knox	\$40,333
Bartholomew and Brown	\$73,000	Kosciusko	\$70,000
Benton	\$62,000	LaGrange	\$73,000
Benton, Fountain and Warren	\$40,000	LaPorte	\$68,250
Benton, Fountain and Montgomery	\$100,000	Lake	\$85,563
Blackford	\$50,000	Lawrence	\$40,000
Boone	\$71,667	Madison	\$53,125
Brown	\$116,667	Marion	\$76,667
Carroll	\$56,000	Marshall	\$76,333
Cass	\$63,700	Miami	\$35,000
Clark	\$95,333	Monroe	\$100,000
Clark and Floyd	\$100,000	Monroe and Owen	\$80,000
Clay	\$31,250	Montgomery	\$77,500
Clinton	\$55,000	Noble	\$43,333
Crawford	\$50,000	Orange	\$40,000
Daviess	\$65,000	Perry	\$75,000
De Kalb	\$71,685	Pike	\$65,000
Dearborn	\$88,750	Porter	\$91,667
Decatur	\$85,000	Pulaski	\$40,000
Delaware	\$65,800	Putnam	\$80,000
Dubois	\$71,000	Randolph	\$55,000
Dubois, Pike, Orange, Crawford, Daviess and Martin	\$80,000	Ripley	\$75,000
Elkhart	\$84,650	Rockville	\$75,000
Elkhart and Goshen	\$90,000	Rush	\$80,000
Elkhart, Marshall and St. Joseph	\$90,000	Scott	\$72,000
Fayette	\$75,000	Shelby	\$89,000
Floyd	\$87,500	Spencer	\$80,000
Floyd and Clark	\$70,000	St. Joseph	\$70,750
Franklin	\$70,000	Steuben	\$70,000
Fulton	\$33,750	Switzerland	\$90,000
Gibson	\$60,000	Tippecanoe	\$87,111
Grant	\$42,000	Union	\$60,000
Greene	\$42,500	Vanderburgh	\$57,857
Hamilton	\$101,667	Vermillion	\$29,000
Hancock	\$125,000	Vigo	\$80,000
Harrison	\$86,000	Wabash	\$87,000
Hendricks	\$88,167	Warrick	\$59,900
Henry	\$50,000	Washington	\$75,000
Howard	\$81,250	Wayne	\$50,000
Huntington	\$67,500	Wells	\$81,250
Huntington and Wells	\$50,000	White	\$60,000
Jackson	\$74,167	Whitley	\$85,000
Jasper	\$77,500		
Jay	\$35,000		
Jefferson	\$62,000		

Source: Community Survey, Indiana Consolidated Plan, 2002.

Survey respondents were asked to list the housing types that are needed most in their communities. Exhibit III-49 shows the types of housing respondents believe are most needed in their communities and at what purchase prices and rents.

Exhibit III-49.**Most Needed Housing Types with Estimated Purchase Price and/or Rent**

Note:

NA indicates data that was not applicable.

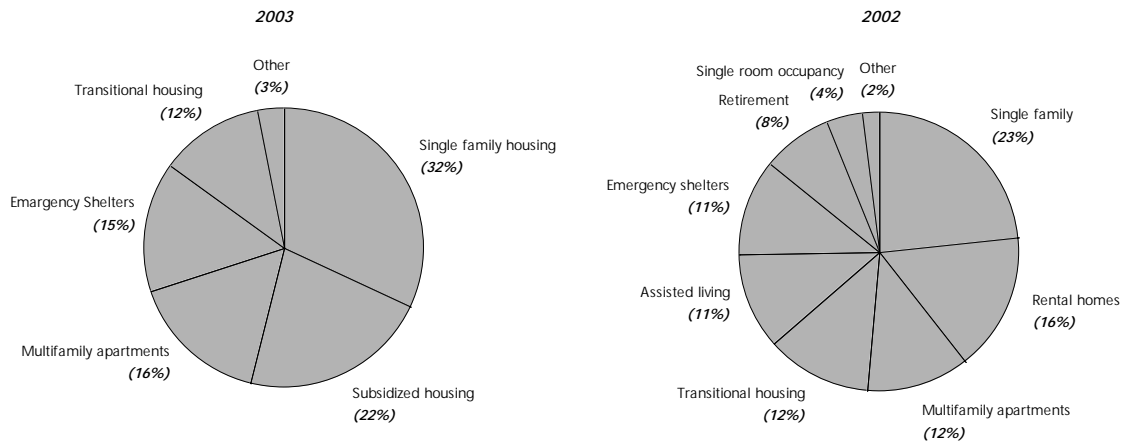
Source:

Community Survey, Indiana Consolidated Plan, 2003.

	<i>Average Purchase Price</i>	<i>Average Rent</i>
Multifamily apartments	NA	\$431
Single family housing	\$75,480	\$465
Transitional housing	NA	\$300
Emergency shelters	NA	NA
Subsidized housing	\$54,150	\$355

The 2002 survey also asked about most needed housing types, although the questions were slightly different (respondents were given more options for housing types, but were not asked to estimate prices or rents). Exhibit III-50 compares the answers to the 2002 and 2003 questions.

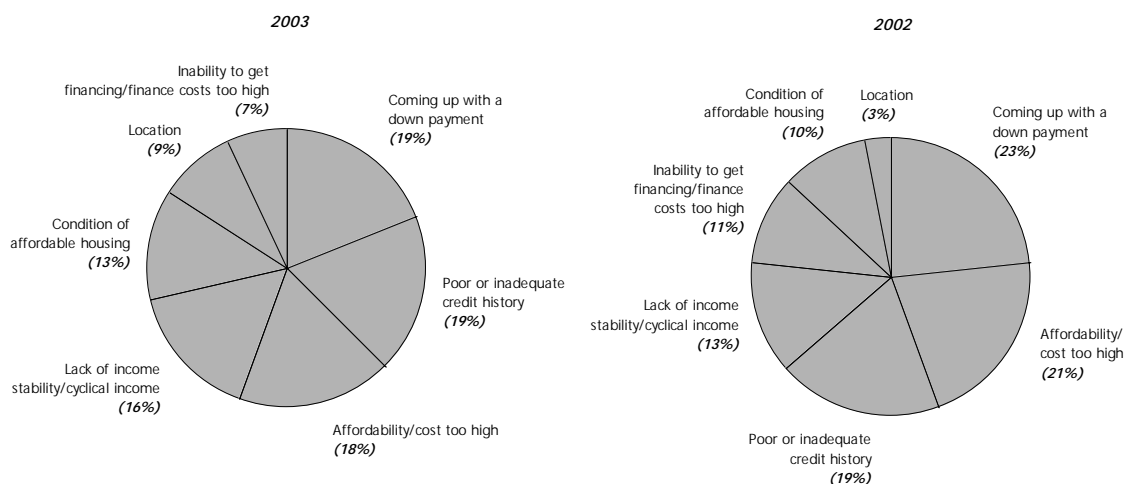
Exhibit III-50.
Most Needed Housing Types, 2002 and 2003



Source: Community Survey, Indiana Consolidated Plan, 2003.

When asked about the greatest impediment to owning a home, respondents in 2003 identified the challenges of coming up with a down payment, poor credit history and housing prices — the same top reasons as identified in 2002. Exhibit III-51 shows the impediments to homeownership identified by survey respondents in 2002 and 2003.

Exhibit III-51.
Greatest Impediments to Homeownership



Source: Community Survey, Indiana Consolidated Plan, 2003.

Special Needs Housing. Respondents were asked about the housing needs in their communities for populations with special needs, including persons experiencing homelessness, individuals with physical and developmental disabilities, individuals with mental illness, the elderly, individuals living with HIV/AIDS and migrant agricultural workers. Exhibit III-52 shows the percentage of respondents who believe that the housing needs of these special needs populations are not being met in their communities in the 2002 and 2003 surveys.

Exhibit III-52.
Percent of Respondents
***Disagreeing* that the Needs**
of Special Populations Are
Being Adequately Met

Source:
Community Survey, Indiana Consolidated Plan,
2003.

<i>Percent Disagreeing</i>	<i>Percent Disagreeing</i>
Homeless	57%
Mentally Ill	54%
Physical Disability	44%
Development Disability	43%
Elderly	39%
HIV/AIDS	38%
Migrant Farm Workers	31%

As shown above, the survey results are fairly similar, except that in 2003 fewer respondents disagreed that the needs of the elderly and persons with disabilities are being met.

Respondents were also asked how the needs of special populations could be better met. Exhibit III-53 on the following pages lists their responses.

Exhibit III-53.

How Can the Needs of Special Populations Be Better Met?

Housing Subsidies

Additional assisted programs, affordable housing.
Additional Section 8 HUD certificates.
Better access to affordable and accessible housing or rental.
By making more permanent rental subsidies available for these groups.
IHFA could purchase or finance apartment and housing assistance for those living with HIV/AIDS.
Increase in subsidized housing, every group should have their own category/pot of funds to address the specific population.
Make rent cheaper, make section 8 vouchers easier to get.
More affordable housing for large families.
More assistance with rehab costs and incentives to restore existing housing stock.
More rental assistance programs for HIV+ due to inability to work and low income status.
More subsidized apts. for mentally ill. Group home, subsidized apts. for people with dual-diagnosis (addiction and mental illness).
More subsidized rental apartments for elderly on a fixed income.
More subsidy, emergency and transitional housing, permanent housing for mentally ill w/families.
Need money for house renovations for the elderly who can't afford repairs.
Need more low-income housing, either multi- or single family. If more section 8 vouchers were available to low income and disabled would help.
Need more subsidized and/or stable, safe low-cost housing (primarily rental property).
Need more vouchers to assist applicants on the waiting list.
Retirement apartments.
Shorter leases for seasonal farm workers.
There is a need for additional sec. 8 for those with mental illness & their families.
There is not enough handicap accessible housing for disabled and elderly.

Housing Stock

Additional construction/rehabilitation funding.
Assist groups like Habitat with funding to provide the appropriate housing needs.
Build and/or renovate existing houses!
Continued expansion of affordable housing/rentals.
Develop more affordable units for homeless and special needs housing. Currently, new units are not affordable to very low-income households.
Develop more special needs housing - supportive services are key.
Funding to help build housing for people with developmental disabilities, mental illness and HIV/AIDS.
Good quality, affordable apartments, duplexes and single family dwellings.
Increasing housing stock, every group should have their own category/pot of funds to address the specific population.
Need more housing, need better quality housing, more affordable housing.
New apartment units for persons and seniors with mental illnesses and/or chronic addictions.
We need soundly built homes. Most of our new housing is mobile.

Exhibit III-53.

How Can the Needs of Special Populations Be Better Met? Continued

Affordability

Accessible rentals and housing at affordable prices.
Affordability is the main issue - price of housing has risen while pay rates of labor have remained stable or fallen and available jobs are lower paying.
Better access to affordable and accessible housing or rental.
It is generally an issue of number of available affordable units. For these populations, more housing choices need to be available.
Home management, medical treatment, advocacy, legal services for those waiting for S.S. or entitlements.
Housing closer to the community transportation.
More family housing at affordable down payment prices and mortgage.
Take the apartments that right now are mainly rented by drug users and fix them up for the other people.

Discrimination

Housing needs can be better met through a housing discrimination testing program. Without testing, many people don't know they are being discriminated against because it is often subtle.

Accessibility

Accessible rentals and housing at affordable prices.
Accessible with close transportation.
Allow the agency to build housing units that specifically meet the needs of adults with developmental disabilities.
More ADA friendly for elderly and persons with disabilities.
Create new housing designed for these special needs populations particularly the homeless and person with disabilities.
Homes made for wheelchair patients.
More community based services that can be accessed and afforded.
More affordable housing in safe neighborhoods. Make landlords do needed repairs.
Ramps and interior modifications that enable independence.
More handicapped accessibility apartments would be a plus.

Congregate Housing

Apartments and assisted living for seniors on limited income.
Congregate living opportunities.
Elderly apartments, assisted living.
Group homes for mental illness.
Group homes that are equipped with adaptive equipment.
Increased housing with supportive services.
More group homes to be built. Use of local people for staffing.
More subsidized apartments for mentally ill. Group home, subsidized apartments for people with dual-diagnosis (addiction and mental illness).
Need group homes for mentally challenged.
Need money for house renovations for the elderly who can't afford repairs.
Not enough housing for people being discharged from hospitals.
Permanent supportive housing.
Person with mental illness need in-care help.
Provide more high tech services to the elderly.
Specific zoning for elderly use. Reduction of development fees.
Subsidized assisted living apartments are strongly needed for the elderly and disabled.
There needs to be more affordable assisted living homes.
We need affordable senior housing units with administrative and recreational facilities.
We need more assisted living quarters for elderly and mentally ill. We need homes w/guidance and meals provided for those unable to help themselves.
We need retirement villas.

Exhibit III-53.

How Can the Needs of Special Populations Be Better Met? Continued

Affordability

Accessible rentals and housing at affordable prices.
Affordability is the main issue - price of housing has risen while pay rates of labor have remained stable or fallen and available jobs are lower paying.
Affordable housing
Affordable Housing
Affordable housing
Affordable housing
Better access to affordable and accessible housing or rental.
Better monthly costs.
Housing that is affordable & in adequate physical condition.
It is generally an issue of number of available affordable units. For these populations, more housing choices need to be made available.
More affordable housing - most people on fixed incomes can't afford basic rent or mortgages.
More affordable housing.
More affordable housing.
More affordable housing. Better landlords.
More affordable housing. Better quality housing.
More available housing - offering safe, affordable conditions. Home management, medical treatment, advocate - legal for those waiting for S.S. or entitlements.
More available, more affordable, closer to the community transportation.
More family housing at affordable down payment prices and mortgage.
Need more affordable housing.
Need more low-income housing.
Need more low-income rental housing.
Provide more affordable shelter and housing.
Take the apartments that right now are mainly rented by drug users and fix them up for the other people.
There needs to be more availability of affordable housing. Either for rent or ownership.

Discrimination

Housing needs can be better met through a housing discrimination testing program. Without testing, many people don't know they are being discriminated against because it is often subtle.

Accessibility

Accessible rentals and housing at affordable prices.
Accessible with close transportation.
Allow the agency to build housing units that specifically meet the needs of adults with developmental disabilities.
More ADA friendly for elderly and persons with disabilities.
Create new housing designed for these special needs populations particularly the homeless and person with disabilities.
Handicapped accessibility built in. On ability for handicapped/disabled to pay.
Homes made for wheelchair patients.
More accessible housing. More community based services that can be accessed and afforded.
More affordable housing in safe neighborhoods, make landlords do needed repairs.
More handicapped accessible.
More safe options, with handicapped accommodations.
One level - no stairs. Larger door ways with easy access.
Ramps and interior modifications that enable independence.
Too many steps - use ramps.
Better access to affordable and accessible housing or rental.
More handicapped accessibility apartments would be a plus.

Exhibit III-53.

How Can the Needs of Special Populations Be Better Met? Continued

Emergency and Transitional Shelters/Homeless

A shelter for families/singles (female and male), short term as well as long term.
Emergency shelters are needed.
Homeless shelters
Homeless housing needs to be subsidized through more non-profit organizations/Housing Authorities, etc.
Homeless people are told to relocate to Indianapolis; our public officials need to take responsibility for their resident's needs.
Transitional housing for homeless persons.
Logansport needs to assist with the needs of the homeless shelter.
More shelters for homeless need to be built or use existing renovated buildings.
More transitional and emergency shelters - dispersed geographically.
A family abuse shelter is needed.
Need housing to compensate for HIV/AIDS and lower income families. Mostly farm land.
Expand the State Shelter Care Plus program with CANI
There is currently no facility for the homeless in Brown County. County uses facility in Bartholomew County.
HOPWA programs need to be strengthened.
Facilities for special needs groups.

Administrative/Funding/Miscellaneous

1) Educate residents about housing services (TV/Radio, community outreach), 2) Encourage small business to build housing 3) Make obtaining building loans easier with govt. trained personnel.
1) Communicate the needs clearly to the community. 2) Match community resources with those in need 3) Add programs and services for un-met needs.
Access to programs and housing along with case management services for people with developmental disabilities. The same for the single and homeless populations.
Additional study funding, additional housing development organizations.
Any special needs person has to have a plan of their own.
Better acceptance and understanding by the community at large.
Better case management. More choice for housing.
Better landlords. Better structures. More state/government moneys.
Formulating a plan to address each of the needs by polling providers and seeking funds.
By representatives of each group coming forward and making us aware of specific needs so that they can be programmed into our Consolidated Planning process.
Case Management to link special populations to services with housing issues.
Collaboration with community groups to help serve needs.
Community service organization need to assist in providing help to the mentally challenged.
Conduct a community housing survey.
County has outstanding programs in place.
Developmentally and Emotionally disabled need a supportive but not restricting atmosphere.
Dispersed housing; people are ghettoized.
Distribute scarce resources based on need then other factors.
Each project should have a percentage targeted toward special needs folks.
Elected officials must recognize this problem and be willing to work for solutions.
Eliminating exclusion in Section 8 for criminal behavior for those w/mental illness.
Community recognition of need and motivation to address need.
For people with mental illness DMHA needs to support efforts to secure HUD funding for housing and support services.
Government inspection to provide oversight.
Human services.
It would take a major attitude shift in what the community could tolerate.
Knox county, excluding Vincennes City needs, are being met by Knox County Housing Authority and Knox County Rural Housing Finance Corp.
Lack of funding has limited necessary requirements.
Local needs assessment, community planning are needed.
More grants and funding.
More funding and making people aware of available funds.
More service providers or perhaps additional funding for current providers.
Need more quality mental health services especially for hare to serve cases and people without Medicaid.
Need public transportation.
Provide education on obtaining resources. Educate communities about the needs of special needs groups.
The local "Mobile home" park which houses many of the immigrants are expensive and very poorly maintained. There are many electrical and sewer problems and very unsafe conditions.
Lack of affordable housing.
Lack of housing for people with HIV/AIDS and seasonal farm workers.

Exhibit III-53.

How Can the Needs of Special Populations Be Better Met? Continued

Administrative/Funding/Miscellaneous, (continued)

Help fund special needs housing, especially in rural counties and in counties with colleges whose students take this housing leaving long term residents without.

I believe that in most cases our needs are met.

NIMBY issues need to be addressed.

Not familiar with special needs.

Our organization does offer housing to these groups but we do encounter on-going issues which can be related to staffing of providers meeting the related needs.

People in charge should have tougher guidelines and should be checked up on more.

Prop owners who rent the prop don't keep prop. properly equipped for renters.

Provide adequate funds to address the above needs.

Seasonal farm workers are put in small housing and there are maybe 8-10 people living in 3 rooms.

Since the city is struggling financially, a coalition of churches and service agencies could pray housing into existence through generosity of the citizens.

So small of a community - special needs groups are a minimum.

State has not been consistent in approach to funding for this population.

Also has not been helpful in funding needed new facilities.

Stricter laws/enforcement of existing law regarding landlord upkeep of inside of homes.

The special needs groups are often given preference.

There's always a need for more assistance to special needs groups. Our mission is to serve people with developmental disabilities by providing housing and staffing services for them.

Through partnerships between financial, for-profit and not-for-profit organizations.

Through private companies who treat or specialize in the care of elderly and people who have HIV/AIDS.

Unsure at this time - this community's economy is not strong.

We don't get seasonal renters, but we are close to towns who do. Could furnish housing to seasonal if advertised.

While facilities catering to the special needs groups are needed and warranted there seems to be a lack of willingness by agencies providing these services to locate in Cedar Lake.

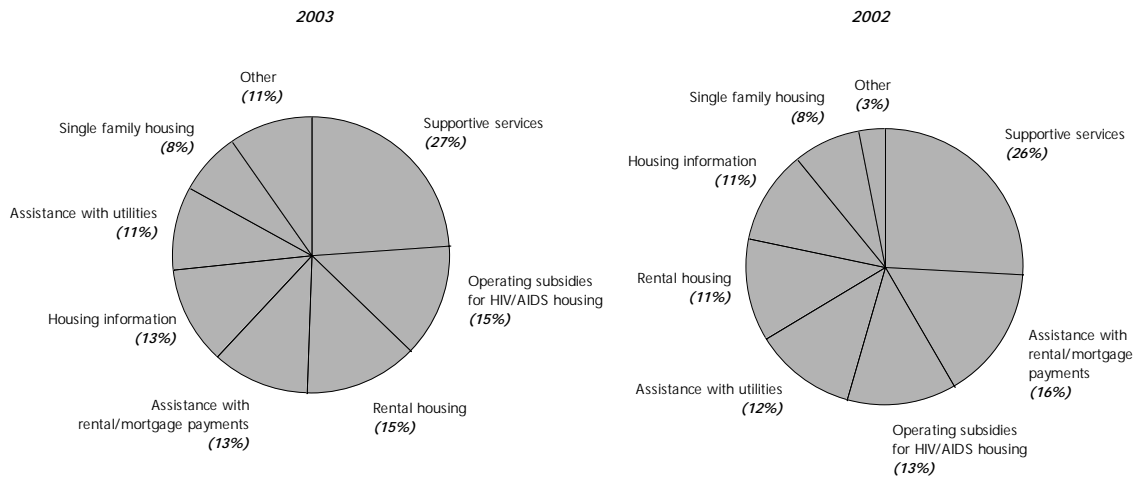
Source: Community Survey, Indiana Consolidated Plan, 2003.

The survey also asked about services available to special needs groups. Respondents noted that meals, transportation, case management, and job training are the supportive services most widely available to special needs groups in the State. The supportive service that is the least likely to be available to special needs groups is home repair assistance.

Seventy-one percent of survey respondents said that the services they presently have available for the special needs groups are **not** adequate.

When asked what is most needed in their communities to meet the needs of persons with HIV/AIDS, respondents cited supportive services, operating subsidies for HIV/AIDS housing, and rental housing as the top three needs. In 2002, the top needs included supportive services, rental/mortgage assistance, and operating subsidies for HIV/AIDS housing. Exhibit III-54 on the following page shows the distribution of the 2002 and 2003 responses to this question.

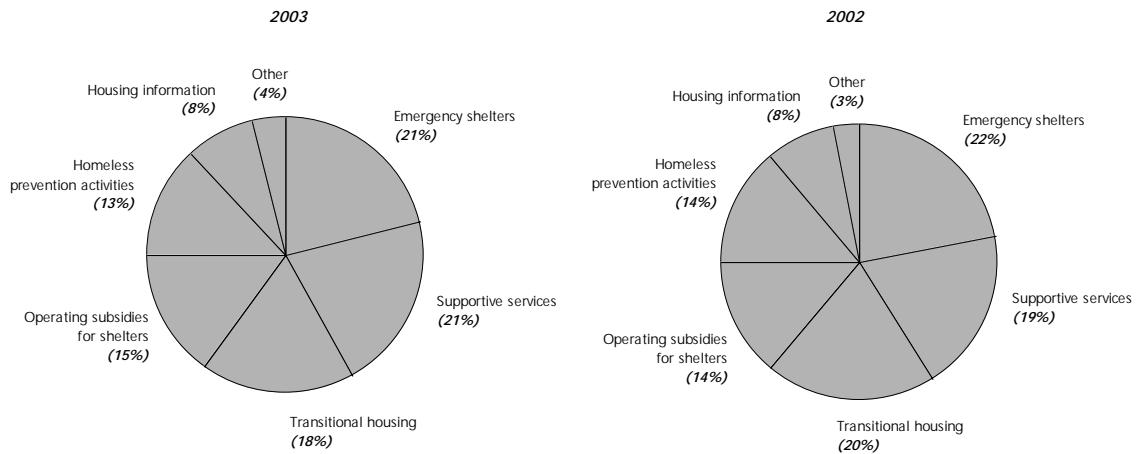
Exhibit III-54.
Community Needs for Persons with HIV/AIDS



Source: Community Survey, Indiana Consolidated Plan, 2003.

Respondents were also asked what is most needed in their communities to meet the needs of persons experiencing homelessness. As in 2002, the top needs were for emergency shelters, supportive services and transitional housing. Exhibit III-55 shows the distribution of the 2002 and 2003 responses to this question.

Exhibit III-55.
Community Needs for Persons Experiencing Homelessness



Source: Community Survey, Indiana Consolidated Plan, 2002.

Finally, respondents were asked to list the supportive services that are in demand by special needs populations but not available in their communities. Exhibit III-56 lists the respondents' comments.

Exhibit III-56.

Special Needs Services Needed but Unavailable

7 day a week public transportation. More affordable health care. More affordable, safe housing.
A & D counseling and treatment, medical transportation, and childcare.
Ability to build housing in flood plane.
Affordable day care (infants also), transportation, housing
Affordable drug treatment.
Affordable transportation for the handicap and elderly who can no longer drive.
Alternative school.
Assistance with utilities and rents.
Assisted Living. Like evening, overnight, and weekend/holiday services.
Basic life skills to support the limited abilities.
Case management - home repair assistance. Subsidy.
Case management for uneducated people who need help learning life skills, and setting appropriate priorities.
Central Housing Authority
Child care - need to train more care-givers and help them start-up.
Child/Senior Daycare.
Community Center
Coordinated Case Management is most critical in helping individuals navigate a confusing and disjointed service system.
Countywide home modification for accessibility.
Dental is not included with Medicaid/Medicare. Case Management needs to double or triple in size.
Down payment. Security deposits. Utility deposits. Home repair assistance.
Education assistance
Emergency shelter
English as a second language for Hispanics.
Family counseling for drug/alcohol abuse. Community Asset Mapping. Individual asset identification.
Finance for low-income homebuyers.
Free bus rides, help with medication cost, help with rent and deposits.
Free counseling for sexual abuse survivors. Free counseling for at-risk children. More access to child care.
Free transportation - no bus system w. side of Wabash River. Homeless shelter - teen shelter.
General population homeless shelter. Transitional housing. Nighttime daycare.
Handicapped accessible housing. Supported (assisted living) for disabled, non-seniors.
Health care is only available for emergencies - routine care available (for people with mental illness).
Health Care prescription coverage, energy assistance, home repair, handicap re-modification of homes.
Help on Dr. appointments, Rx's, Burial, Home Repair, qualified child care.
Home cleaning services.
Home ownership education; No CHDO in the area; need help to increase housing opportunity for Hispanic property.
Home repair and transportation assistance for the elderly. Can get some assistance from Elkhart County.
Home repair assistance
Homeless often are on "waiting list" for shelter.
Homeless people have no immediate help. Those who don't qualify for Medicaid have no help with medical expenses.
Housekeeping training and assistance - more hours needed. Basic chore and errand assistance.
Housing and health assistance for elderly.

Exhibit III-56.**Special Needs Services Needed but Unavailable, Continued**

Housing for mentally ill.
Housing for offenders release. Closest is Michigan City, IN.
If person is connected with organization providing supportive service they are fortunate.
In-home care/assistance services that enable residents to remain in their homes for as long as possible.
Interpretive services and legal services for Hispanics.
Issue is access particularly for teens and young adults.
Job access whereby people that need public transportation; also affordable/subsidized childcare.
Job training - higher school standards - stop advancing children in school when they don't understand or haven't learned the basics - it only puts them further behind in the next grade.
Job Training needs to be coordinated better, a number of agencies are providing this service, however, they need to communicate and refer to each other better
Job training, that pays during training for local factories.
Landlord tenant relationship. Tenant/Rental Education.
Local welfare offices, also local place to pay you utilities.
Long term residential substance abuse treatment.
Low-income housing. 1st time home buyers assistance.
Meals on Wheels
Medicaid waiver slots - supply is scarce.
Medical care for Medicaid/Hoosier Healthcare.
Medical, especially for women. Child care. Mental health care; especially emergency.
More housing subsidies, waiting list for Section 8 too long and too limited in housing choices.
More housing that is affordable and safe.
More subsidized housing - only 100 units are available.
Most services are available. There aren't enough services for everyone who needs them.
Need Alzheimer's support groups.
Neighborhood revitalization is needed to help leverage money for homeowners.
Neighborhood safety and drug elimination programs are needed.
Peer support for adults with mental illness. KEY would like to provide this.
Rural areas only have services through nearest town - home health care service.
Somewhere where senior citizens can go to seek financial and housing counseling free of charge.
Specific subsidy for homeownership.
Subsidies for housing has a 2 year waiting list and none available (no subsidy available) in Owen county.
The 3rd poorest county in the state.
Subsidized housing - apartments. Deposit help. Help paying rent to stop/postpone eviction.
Subsidy for housing - little if any exists. Renters rights lacking.
Taxi service.
Testing for housing discrimination is in demand. Funding for an effective testing program is insufficient.
There are no services available for the homeless, except a free lunch at the Salvation Army, which provides one nights stay at a motel for transients.
Transitional housing for families, young offenders returning to the community.
Transitional/rental housing.
Transportation - Dubois County.
Transportation - rural, elderly and disabled, low-income, subsidies.
Transportation from Michigan City to LaPorte.
Women's alcohol and drug rehabilitation housing

Source: Community Survey, Indiana Consolidated Plan, 2003.

Lead Based Paint Hazards

As in 2002, the 2003 survey included several questions to determine how much of a problem lead based paint hazards are in communities. Most survey respondents said that lead abatement procedures increase the cost of providing affordable housing a moderate to high amount. Survey respondents were provided with a scale of one to five to rank the increase in housing costs because of lead abatement, with one being the least and five being the most. The distribution of responses is shown in Exhibit III-57.

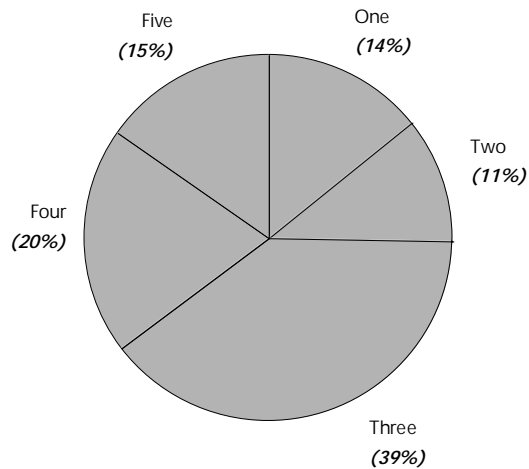
Exhibit III-57.
How Much Do Lead
Abatement Procedures
Increase Cost of Housing?

Note:

1 = low, 5 = high.

Source:

Community Survey, Indiana Consolidated Plan,
2003.



In addition, 70 percent of survey respondents said there were not adequate funds in their communities to address lead based paint hazards in housing, compared to 77 percent in 2002. Almost half of respondents agreed that there was a need for funds to address lead based paint in housing with poisoned children. Sixty percent of those surveyed said there was a need for a partnership between housing and health care providers to address lead based paint hazards — down from 77 percent in 2002.

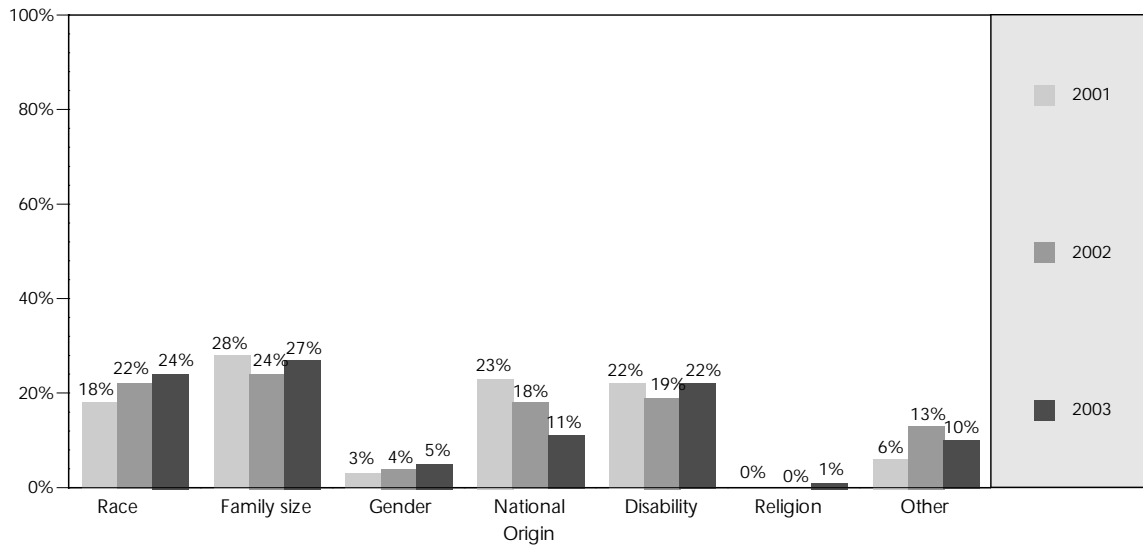
Fair Housing

The fair housing questions included on the survey instrument asked respondents about the prevalence of discrimination in their communities and the existing barriers to fair housing.

Compared to 2001 and 2002, a larger percentage of respondents identified race as a type of discrimination occurring in their communities. Discrimination based on family size was up from 2002, as was discrimination based on gender.

Exhibit III-58 on the following page compares the survey results for this question from 2001, 2002 and 2003.

Exhibit III-58.
Comparison of Types of Housing Discrimination, 2001, 2002 and 2003



Note: Zero percent indicates that the category was not given as an option.
Source: Community Surveys, Indiana Consolidated Plan, 2001-2003.

In addition, 26 percent of the 2003 respondents felt that minorities, large families, and persons with disabilities could not obtain the housing they desire in their communities. This was a dramatic drop from 2002, when 45 percent of respondents agreed with this statement.

Respondents were also asked about the types of barriers to housing choice that exist in their communities. Respondents said that the cost of housing was the largest barrier to housing choice, followed by public transportation and distance to employment. Exhibit III-59 on the following page shows the perceived barriers to housing choice for 2001, 2002 and 2003. The top barriers were very similar across the three years.

Exhibit III-59.
Barriers to Housing Choice

Source:
Community Survey, Indiana Consolidated Plan, 2003.

	2001	2002	2003
Cost of housing	34%	34%	36%
Public transportation	23%	19%	23%
Housing discrimination	7%	7%	6%
Lack of accessibility requirement	14%	14%	10%
Distance to employment	21%	19%	19%
Age restricted housing	NA	7%	5%

In addition to the above barriers, respondents were asked about the ability of low-income families to refinance their homes at competitive interest rates. Forty-two percent of respondents believed that low-income families are **not** able to refinance their homes at competitive interest rates. This was a 4 percentage point increase from 2002, where 38 percent of respondents agreed with this statement.

Respondents were also asked about the zoning and rental policies that prohibit fair housing choice. As in 2002, 10 percent of the respondents said there were zoning or land uses in their communities that create barriers to fair housing choice and encourage fair housing segregation.

Sixty-one percent of respondents felt that members of their community are aware that discrimination is prohibited in housing mortgage lending and advertising, compared with 62 percent in 2002. Twenty-seven percent of survey respondents — the same as in 2002 — indicated that people in their community know whom to contact to report housing discrimination. Finally, only 22 percent of respondents agreed that the housing enforcement agency in their community has sufficient resources to handle the amount of discrimination that may occur; this compares with 18 percent in 2002.

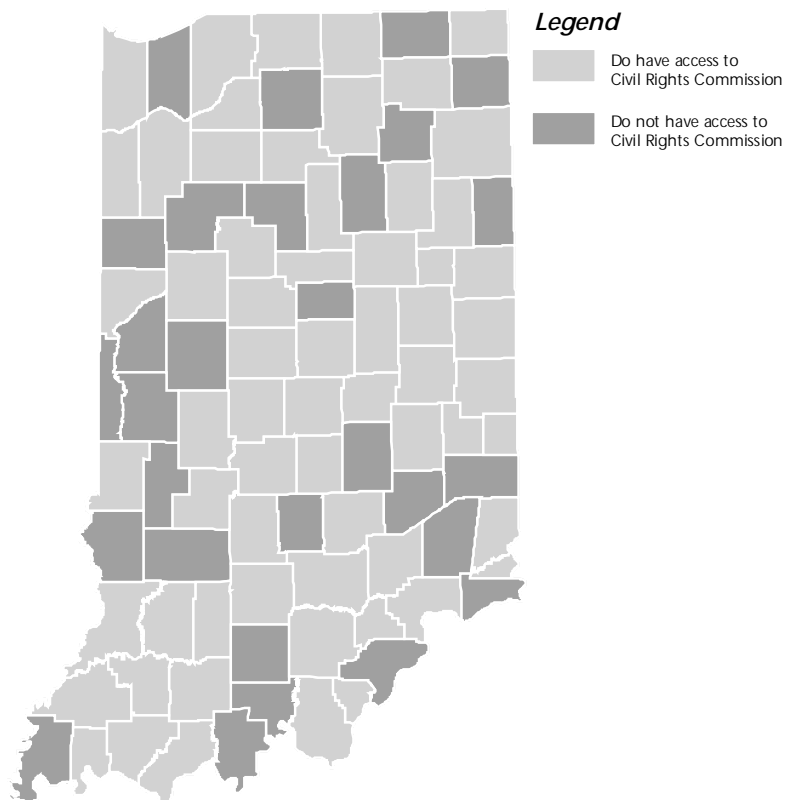
Fair Housing Policy

In the 2003 survey, respondents were asked a number of questions specifically about their community's fair housing policies. Half of the respondents who answered this question indicated that their community has joined forces with another organization to promote fair housing. This was up from 43 percent in 2002.

Seventy-five percent of survey respondents — about the same percentage as in 2002 — said that their community has access to a civil rights commission/office. Exhibit III-60 on the following page shows which counties in the State have civil rights offices, as reported by survey respondents.

Exhibit III-60. Access to a Civil Rights Office, by County

Source:
Community Survey, Indiana Consolidated
Plan, 2003.



Three percent of respondents indicated that there had been housing complaints filed against their organization in the past five years and the respondents indicated that many of those complaints were unfounded.

The survey also inquired about various fair housing policy ordinances. Seventy percent of respondents said that their community has a fair housing resolution/ordinance, and 63 percent indicated they have an affirmative action plan. Seventy-three percent of respondents said they had an equal opportunity ordinance. Sixty-nine percent of respondents indicated that their community's resolution/ordinance had been approved by the State.

Community Development Needs

In the 2003 Community Survey, respondents were also asked about a range of community development issues in their communities, including employment conditions, the need for public infrastructure improvements, and the need for community and special needs services and facilities.

The survey asked respondents to rank the community development needs in order of how much they are needed in their areas (with 1 being the least needed and 5 being the most needed). The average levels of need of community development needs are shown in Exhibit III-61 on the following page.

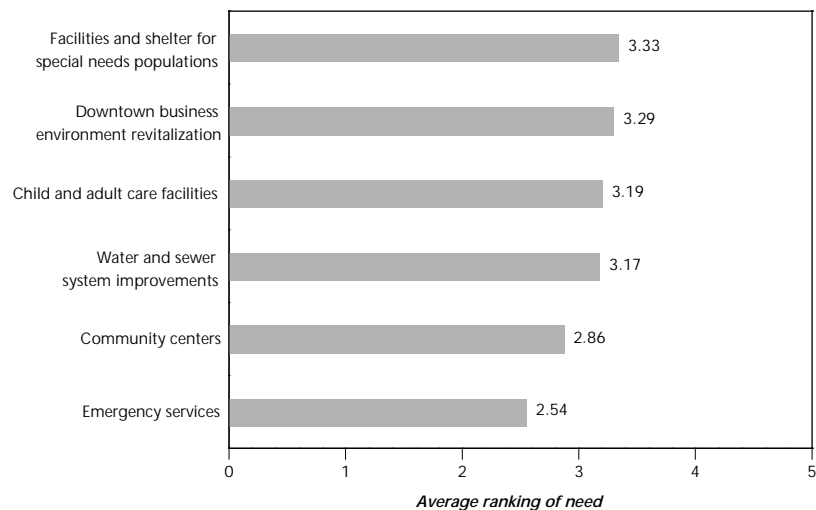
Exhibit III-61.
Average Ranking of
Community Development
Needs

Note:

1 = least needed to 5 = most needed

Source:

Community Survey, Indiana Consolidated
Plan, 2003.



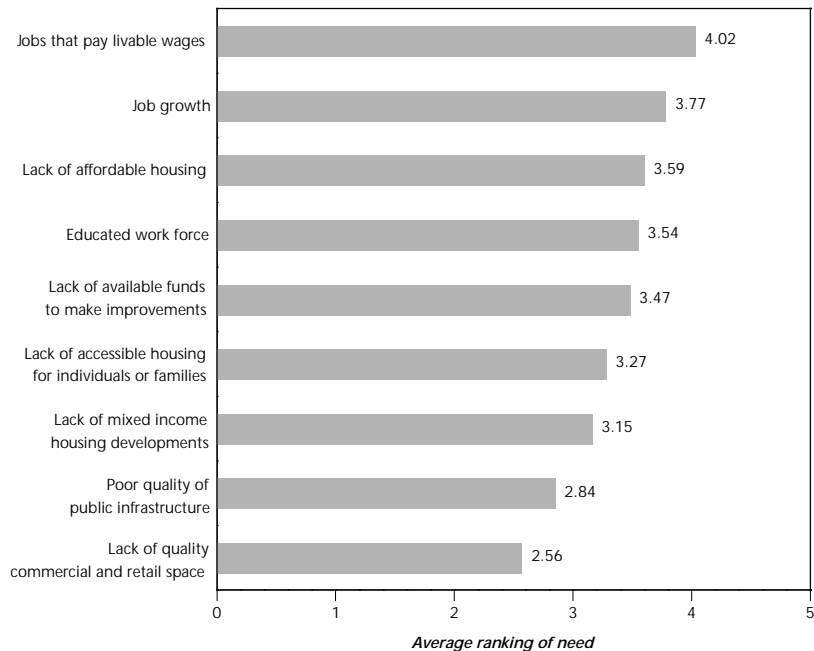
In general, respondents indicated a need for facilities and shelters for special needs populations and downtown business environment revitalization. Moderate needs included child and adult care facilities and water and sewer system improvements.

Respondents were also asked to rank the barriers to community and economic development their community faces on a scale of one to five, with a one being the smallest barrier and five being the biggest barrier. Exhibit III-62 shows the average ranking of barriers to community and economic development.

**Exhibit III-62.
Barriers to Community
and Economic
Development**

Note:
1 = smallest barrier and 5 = biggest barrier.

Source:
Community Survey, Indiana Consolidated
Plan, 2003.



As shown above, respondents' perceive the top barriers to development in Indiana's communities as employment and housing related.

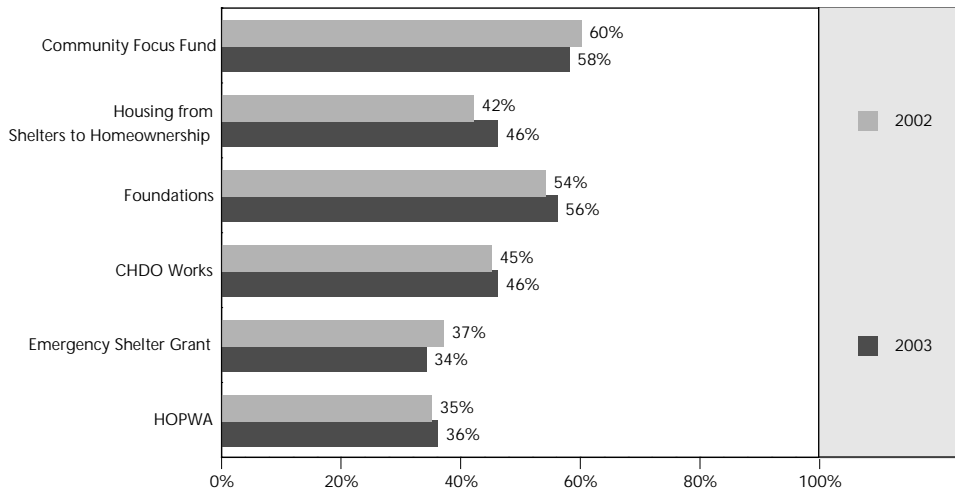
Respondents were also asked if the perception of their community has improved or declined and the reasons for any change.

In the 2001 survey, 70 percent of respondent said that the perception of their community had improved during the past five years. In contrast, just 54 percent of respondent to the 2002 survey and 44 percent of the 2003 survey said that perception had improved. In 2003 42 percent said it has declined and 13 percent said it has stayed the same.

In the 2003 survey, 27 percent of survey respondents said that the number of jobs had increased in their communities, compared to 37 percent in 2002 and 60 percent in 2001. Fifty-seven percent of 2003 respondents said the number of jobs in their communities had decreased, compared to 50 percent in 2002 and only 26 percent in 2001.

HUD grant programs. The final survey questions solicited information about awareness and use of the State's HUD grant programs, administered by the Indiana Department of Commerce, the Indiana Housing Finance Authority, and the Family Social Services Administration. Exhibit III-64 shows community awareness of survey respondents for six programs funded by CDBG, HOME, HOPWA and ESG funds.

Exhibit III-64.
Awareness of Federal Programs



Source: Community Survey, Indiana Consolidated Plan, 2003.

Compared to 2002, respondents had about the same awareness of the Community Focus Fund program; a greater awareness of Housing from Shelters to Homeownership; about the same awareness of the Foundations and CHDO Works programs; less awareness of the Emergency Shelter Grant; and about the same awareness of the HOPWA program.

Exhibit III-65.
Community Perception, 2001-2003

Source:
 Community Survey, Indiana Consolidated Plan, 2001-2003.

